



# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	86 Partridge Circle
CBL:	288A A008001
PROPERTY OWNER(S) NAME	
OWNER NAME:	
Applicant Name:	Owen Brochu
Mailing Address of Owner/Applicant (if Different)	143 Gore Alfred Me
E Mail:	
Owner/Applicant Statement	
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.	
Signature of Owner/Applicant	Date

Town/City	PORTLAND	Permit #	2017-07054
Date Permit Issued	2/6/17	Fee: \$	Double Fee Charged <input type="checkbox"/>
Local Plumbing Inspector Signature		L.P.I. # 1081	
The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.			
<b>Caution: Inspection Required</b>			
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.			
LPI Signature		Date Approved (Final)	

PERMIT INFORMATION		
This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING  <div style="text-align: center;">             RECEIVED   <b>FEB 06 2017</b>               Dept. of Building Inspections              City of Portland, Maine           </div>	Type of Structure to be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____  <div style="text-align: center; border: 1px solid black; padding: 5px;"> <b>Please call 874-8703 with your permit # to schedule inspections!</b> </div>	Plumbing to be Installed by:  NAME: <u>Owen Brochu</u> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER  LICENSE # <u>MSH 9010646</u>
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number      Type of Fixture	Column 1 Number      Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	<input type="checkbox"/> Hosebib / Sillcock <input type="checkbox"/> Floor Drain <input type="checkbox"/> Urinal <input type="checkbox"/> Drinking Fountain <input type="checkbox"/> Indirect Waste <input type="checkbox"/> Water Treatment Softener, Filter, Etc. <input type="checkbox"/> Grease / Oil Separator <input type="checkbox"/> Roof Drain <input type="checkbox"/> Bidet <input type="checkbox"/> Other: _____	<input type="checkbox"/> Bathtub (and Shower) <input type="checkbox"/> Shower (separate) <input checked="" type="checkbox"/> Sink <input checked="" type="checkbox"/> Wash-Basin <input type="checkbox"/> Water Closet (Toilet) <input type="checkbox"/> Clothes Washer <input type="checkbox"/> Dish Washer <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Laundry Tub <input type="checkbox"/> Water Heater
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 1
OR		<input type="checkbox"/> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>PERMIT FEE (TOTAL)</b>