



12096

PLUMBING PERMIT APPLICATION

PROPE

Street: 1110 BRIGHTON AVE (SUITE "A")
~~400~~

CBL: 263A ADD5

PROPERTY OWNER(S) NAME

NAME: BATHFITTERS

Applicant Name: SOUTHERN MAINE PUBC & BTR INC

Mailing Address of Owner/Applicant (if Different): 160 PIZETUNPSCOT ST PORTLAND, ME 04103

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] Date 10/7/13

Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 201302281

Date Permit Issued 10/08/13 Fee: \$ 80 Double Fee Charged []

[Signature] L.P.I. # 360

Local Plumbing Inspector Signature

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.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

Date Approved (Rough-in) _____

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>COMM</u>	Plumbing to be Installed by: NAME: <u>LEONARD R. DRAPEN</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>MS 02288</u>																																																														
	RECEIVED OCT 10 2013 Dept. of Building Inspection City of Portland Maine Please call 874-8703 with your permit # to schedule inspections!																																																															
Hook-Up & Piping Relocation Maximum of 1 Hook-Up <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"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR <input type="checkbox"/> TRANSFER FEE (\$10.00)	<table border="1"> <thead> <tr> <th>Column 2</th> <th>Column 1</th> </tr> <tr> <th>Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Silcock</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td></tr> <tr><td><input type="checkbox"/></td><td>Fixtures (Subtotal) Column 2</td></tr> <tr><td colspan="2">Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge</td></tr> </tbody> </table>	Column 2	Column 1	Number	Type of Fixture	<input type="checkbox"/>	Hosebib / Silcock	<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"/>	Fixtures (Subtotal) Column 2	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		<table border="1"> <thead> <tr> <th>Column 1</th> <th>Column 2</th> </tr> <tr> <th>Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Sink</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Water Heater</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>TOTAL FIXTURES</td></tr> <tr><td><input type="checkbox"/></td><td>Fixture Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Transfer Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Hook-Up & Relocation Fee</td></tr> </tbody> </table>	Column 1	Column 2	Number	Type of Fixture	<input type="checkbox"/>	Bathtub (and Shower)	<input type="checkbox"/>	Shower (separate)	<input checked="" type="checkbox"/>	Sink	<input checked="" type="checkbox"/>	Wash Basin	<input checked="" 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 checked="" type="checkbox"/>	Water Heater	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 1	<input checked="" type="checkbox"/>	TOTAL FIXTURES	<input type="checkbox"/>	Fixture Fee	<input type="checkbox"/>	Transfer Fee	<input type="checkbox"/>	Hook-Up & Relocation Fee
Column 2	Column 1																																																															
Number	Type of Fixture																																																															
<input type="checkbox"/>	Hosebib / Silcock																																																															
<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"/>	Fixtures (Subtotal) Column 2																																																															
Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge																																																																
Column 1	Column 2																																																															
Number	Type of Fixture																																																															
<input type="checkbox"/>	Bathtub (and Shower)																																																															
<input type="checkbox"/>	Shower (separate)																																																															
<input checked="" type="checkbox"/>	Sink																																																															
<input checked="" type="checkbox"/>	Wash Basin																																																															
<input checked="" 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 checked="" type="checkbox"/>	Water Heater																																																															
<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 1																																																															
<input checked="" type="checkbox"/>	TOTAL FIXTURES																																																															
<input type="checkbox"/>	Fixture Fee																																																															
<input type="checkbox"/>	Transfer Fee																																																															
<input type="checkbox"/>	Hook-Up & Relocation Fee																																																															
Please call 874-8703 with your permit # to schedule inspections!		\$80 PERMIT FEE (TOTAL)																																																														