



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 1041 Brighton Ave
 CBL:

PROPERTY OWNER(S) NAME

OWNER NAME: Boulos

Applicant Name: Carazzo & Son's Plumbing Inc

Mailing Address of Owner/Applicant (if Different) 700 US St Apt 202 Scarborough ME 04074

E Mail: 30carazz258@gmail.com

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: [Signature] Date: 8/11/16

Town/City PORTLAND Permit # 2016-02009

Date Permit Issued 8/11/16 Fee: \$ _____ Double Fee Charged

L.P.I. # 1081

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.

LPI Signature: [Signature] Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
 1. NEW PLUMBING
 2. RELOCATED PLUMBING

RECEIVED
 AUG 01 2016

Dept. of Building Inspections
 City of Portland Maine

Type of Structure to be Served

- SINGLE FAMILY RESIDENCE
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER-SPECIFY Commercial

Please call 874-8703 with your permit # to schedule inspections!

Plumbing to be Installed by:

NAME: Steve

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D HOUSING DEALER / MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 7894

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Hosebib / Silcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input checked="" type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	Water Heater
OR	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 2		<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1	
<input type="checkbox"/> TRANSFER FEE: (\$10.00)	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<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!			<u>50.00</u> PERMIT FEE (TOTAL)	