



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 1410-Forest Ave Portland
 CBL:

PROPERTY OWNER(S) NAME
 OWNER NAME: BEN ROPER
 Applicant Name: PAUL GEOFFRION
 Mailing Address of Owner/Applicant (if Different): PO BOX 6269 CAPE ELIZABETH ME. 04107
 E Mail: eagle RedPASS@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.
Paul Geoffrion
 Signature of Owner/Applicant Date

Town/City **PORTLAND** Permit # 2017-07150
 Date Permit Issued 4/19/17 Fee: \$ 140.00 Double Fee Charged
 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.

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 _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
 1. NEW PLUMBING
 2. RELOCATED PLUMBING
 RECEIVED
 APR 19 2017
 Dept. of Building Inspections
 City of Portland Maine

Type of Structure to be Served
 1. SINGLE FAMILY RESIDENCE
 2. MODULAR OR MOBILE HOME
 3. MULTIPLE FAMILY DWELLING
 4. OTHER-SPECIFY _____
Please call 874-8703 with your permit # to schedule inspections!

Plumbing to be Installed by:
 NAME: PAUL GEOFFRION
 1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER / MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER
 LICENSE # MS91000814915

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 checked="" type="checkbox"/> 1	Hosebib / Sillcock	<input checked="" type="checkbox"/> 2	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/> 4	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
<input checked="" type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/> 2	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input checked="" type="checkbox"/> 2	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input checked="" type="checkbox"/> 2	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
OR			TOTAL FIXTURES	
<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"/> 139.00	Fixture Fee
			<input checked="" type="checkbox"/> 10.00	Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! 140.00 PERMIT FEE (TOTAL)