

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Town/City PORTLAND Permit # 2016-08093	
Street: 314 Warren Ave		Date Permit Issued 11/4/16 Fee: \$ 600.00 Double Fee Charged <input type="checkbox"/>	
CBL: 296 D002001		L.P.I. # 1081	
PROPERTY OWNER(S) NAME			
OWNER NAME: Dwight Baker		Local Plumbing Inspector Signature	
Applicant Name: Darby Plumbing & Heating Inc.		<p>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.</p> <p style="text-align: center;">Caution: Inspection Required</p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p>	
Mailing Address of Owner/Applicant (if Different): 29 Vansl. Ave			
E Mail: Baker.D.MC@11153.com			
Owner/Applicant Statement			
<p>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.</p> <p>Signature of Owner/Applicant: <i>[Signature]</i> Date: 11/2/16</p>		<p>Caution: Inspection Required</p> <p>LPI Signature: <i>[Signature]</i> Date Approved (Final): 11/4/16</p>	

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center; font-size: 1.2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center; font-size: 1.2em; font-weight: bold;">NOV 04 2016</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p style="text-align: center;">Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Office</u></p> <p style="text-align: center; font-weight: bold;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p style="text-align: center;">Plumbing to be Installed by:</p> <p>NAME: <u>Tim Dackley</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>011161011111</u></p>																																																																
<p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><input checked="" type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</p> <p><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</p> <p><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> TRANSFER FEE \$10.00</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Number</th> <th style="width: 80%;">Type of Fixture</th> <th style="width: 10%;">Number</th> <th style="width: 10%;">Column 1</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>Hosebib / Sillcock</td> <td><input type="checkbox"/></td> <td>Bathtub (and Shower)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Floor Drain</td> <td><input type="checkbox"/></td> <td>Shower (separate)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Urinal</td> <td><input checked="" type="checkbox"/></td> <td>Sink</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Drinking Fountain</td> <td><input checked="" type="checkbox"/></td> <td>Wash Basin</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Indirect Waste</td> <td><input checked="" type="checkbox"/></td> <td>Water Closet (Toilet)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Water Treatment Softener, Filter, Etc.</td> <td><input type="checkbox"/></td> <td>Clothes Washer</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Grease / Oil Separator</td> <td><input type="checkbox"/></td> <td>Dish Washer</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Roof Drain</td> <td><input type="checkbox"/></td> <td>Garbage Disposal</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Bidet</td> <td><input type="checkbox"/></td> <td>Laundry Tub</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other:</td> <td><input checked="" type="checkbox"/></td> <td>Water Heater</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Fixtures (Subtotal) Column 2</td> <td><input checked="" type="checkbox"/></td> <td>Fixtures (Subtotal) Column 1</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td>TOTAL FIXTURES</td> </tr> <tr> <td></td> <td style="text-align: center;">Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture</td> <td><input type="checkbox"/></td> <td>Fixture Fee</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Transfer Fee</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Hook-Up & Relocation Fee</td> </tr> </tbody> </table>	Number	Type of Fixture	Number	Column 1	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Bathtub (and Shower)	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)	<input type="checkbox"/>	Urinal	<input checked="" 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	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 1			<input checked="" type="checkbox"/>	TOTAL FIXTURES		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	<p style="text-align: center;">PERMIT FEE (TOTAL)</p>
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