



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	1576 Forest Avenue
CBL:	299 0001 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Larson Enterprises
Applicant Name:	Maietta/Titus/Blaschke Plu ^g
Mailing Address of Owner/Applicant (if Different)	1566 Forest Ave. Portland, me. 04103
E Mail:	mtbphinc@maine.rr.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	Date
<i>Peter J. Maietta</i>	12/15/2016

Town/City	PORTLAND	Permit #	2016-08143
Date Permit Issued	12/16/16	Fee:	\$430
		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.			
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)	
<i>[Signature]</i>		12/16/16	

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;">RECEIVED</p> <p style="text-align: center;">DEC 16 2016</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p>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 checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Peter J. Maietta</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>MS7395</u></p>																																																										
<p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><input 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 checked="" type="checkbox"/> TRANSFER FEE \$10.00</p>	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td>10002</td><td>Hosebib / Sillcock</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>10001</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>10003</td><td>Fixtures (Subtotal) Column 2</td></tr> </tbody> </table> <p style="text-align: center;">Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture</p>	Number	Column 2 Type of Fixture	10002	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.	10001	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	10003	Fixtures (Subtotal) Column 2	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td>10004</td><td>Bathtub (and Shower)</td></tr> <tr><td>10001</td><td>Shower (separate)</td></tr> <tr><td>10009</td><td>Sink</td></tr> <tr><td>10006</td><td>Wash Basin</td></tr> <tr><td>10006</td><td>Water Closet (Toilet)</td></tr> <tr><td>10004</td><td>Clothes Washer</td></tr> <tr><td>10004</td><td>Dish Washer</td></tr> <tr><td>10001</td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td>10004</td><td>Water Heater</td></tr> <tr><td>0039</td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td>10042</td><td>TOTAL FIXTURES</td></tr> <tr><td>1430</td><td>Fixture Fee</td></tr> <tr><td>110</td><td>Transfer Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Hook-Up & Relocation Fee</td></tr> <tr><td>440.00</td><td>PERMIT FEE (TOTAL)</td></tr> </tbody> </table>	Number	Column 1 Type of Fixture	10004	Bathtub (and Shower)	10001	Shower (separate)	10009	Sink	10006	Wash Basin	10006	Water Closet (Toilet)	10004	Clothes Washer	10004	Dish Washer	10001	Garbage Disposal	<input type="checkbox"/>	Laundry Tub	10004	Water Heater	0039	Fixtures (Subtotal) Column 1	10042	TOTAL FIXTURES	1430	Fixture Fee	110	Transfer Fee	<input type="checkbox"/>	Hook-Up & Relocation Fee	440.00	PERMIT FEE (TOTAL)
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