



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	133 Belfort Street
CBL:	300 057 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Paul Thompson
Applicant Name:	Paul Thompson
Mailing Address of Owner/Applicant (if Different)	nehomeinspect@gmail.com
E Mail:	Paul Thompson
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 10-21-2016

Town/City **PORTLAND** Permit # **2016-08074**
 Date Permit Issued **10/25/16** Fee: \$ _____ 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. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING RECEIVED OCT 25 2016 Dept. of Building Inspections City of Portland Maine	Type of Structure to be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ Please call 874-8703 with your permit # to schedule inspections!	Plumbing to be Installed by: NAME: Paul Thompson 1. <input 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 checked="" type="checkbox"/> PROPERTY OWNER LICENSE #																																																						
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>Number</th> <th>Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></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><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 colspan="2">Fixtures (Subtotal) Column 2</td> </tr> </tbody> </table> Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	Number	Column 2 Type of Fixture	<input type="checkbox"/>	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.	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	Fixtures (Subtotal) Column 2		<table border="1"> <thead> <tr> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Sink</td></tr> <tr><td><input 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 type="checkbox"/></td><td>Water Heater</td></tr> <tr> <td colspan="2">Fixtures (Subtotal) Column 1</td> </tr> <tr> <td colspan="2">TOTAL FIXTURES</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee <input type="checkbox"/> Hook-Up & Relocation Fee </td> </tr> <tr> <td colspan="2"> PERMIT FEE (TOTAL) 50 </td> </tr> </tbody> </table>	Number	Column 1 Type of Fixture	<input type="checkbox"/>	Bathtub (and Shower)	<input checked="" type="checkbox"/>	Shower (separate)	<input checked="" type="checkbox"/>	Sink	<input 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 type="checkbox"/>	Water Heater	Fixtures (Subtotal) Column 1		TOTAL FIXTURES		<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee <input type="checkbox"/> Hook-Up & Relocation Fee		PERMIT FEE (TOTAL) 50	
Number	Column 2 Type of Fixture																																																							
<input type="checkbox"/>	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.																																																							
<input type="checkbox"/>	Grease / Oil Separator																																																							
<input type="checkbox"/>	Roof Drain																																																							
<input type="checkbox"/>	Bidet																																																							
<input type="checkbox"/>	Other: _____																																																							
Fixtures (Subtotal) Column 2																																																								
Number	Column 1 Type of Fixture																																																							
<input type="checkbox"/>	Bathtub (and Shower)																																																							
<input checked="" type="checkbox"/>	Shower (separate)																																																							
<input checked="" type="checkbox"/>	Sink																																																							
<input 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 type="checkbox"/>	Water Heater																																																							
Fixtures (Subtotal) Column 1																																																								
TOTAL FIXTURES																																																								
<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee <input type="checkbox"/> Hook-Up & Relocation Fee																																																								
PERMIT FEE (TOTAL) 50																																																								
Please call 874-8703 with your permit # to schedule inspections!																																																								