




PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	1705 Forest Ave
CBL:	382 K021 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Joe Harvey
Applicant Name:	Caiazza & Sons Plumbing
Mailing Address of Owner/Applicant (if Different)	700 US Rt. 1 Scarborough Maine 04074
E Mail:	Scaiazza58@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	Date: 7/24/17

Town/City	PORTLAND	Permit #	2017-07272
Date Permit Issued	7/24/17	Fee: \$	50 - 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)

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING <div style="text-align: center;"> RECEIVED JUL 24 2017 Dept. of Building Inspections City of Portland Maine </div>	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 _____ <div style="border: 1px solid black; padding: 2px; text-align: center;"> Please call 874-8703 with your permit # to schedule inspections! </div>	Plumbing to be Installed by: NAME: <u>Steve Caiazza</u> 1. <input checked="" 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 type="checkbox"/> PROPERTY OWNER LICENSE # <u>7844</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2	Column 1
	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"/> Hosebib / Sillcock	<input checked="" 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 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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<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 checked="" type="checkbox"/> Other: <u>Ejector Pump</u>	<input type="checkbox"/> Water Heater
	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
OR		<input type="checkbox"/> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE \$[10.00]	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
Please call 874-8703 with your permit # to schedule inspections!		50.00 PERMIT FEE (TOTAL)