



11973

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 37 Plymouthe St.

CBL: 343-B-13

PROPERTY OWNER(S) NAME

NAME: Mike Mulken

Applicant Name: Scott Brown

Mailing Address of Owner/Applicant (if Different) 26 Thornton Av. So. Port.

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: Scott E. Brown Date: 7.3.13

Town/City PORTLAND

Permit # 2013-66395

Date Permit Issued 7/3/13 Fee: \$ Double Fee Charged []

Local Plumbing Inspector Signature

L.P.I. # 360

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.

Date Approved (Rough-In)

LPI Signature

Date Approved (Final)

PERMIT INFORMATION

This Application is for

1. ☒ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

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: Scott Brown

1. ☒ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D HOUSING DEALER / MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # 8152

Hook-Up & Piping Relocation
Maximum of 1 Hook-Up

☐ HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

☐ HOOK-UP: to an existing subsurface wastewater disposal system

☐ PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

☐ TRANSFER FEE \$10.00

Column 2

Number

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: _____ |
| <input type="checkbox"/> | Fixtures (Subtotal) Column 2 |

Column 1

Number

Type of Fixture

- | | |
|--------------------------|------------------------------|
| <input type="checkbox"/> | Bathtub (and Shower) |
| <input type="checkbox"/> | Shower (separate) |
| <input type="checkbox"/> | Sink |
| <input type="checkbox"/> | Wash Basin |
| <input 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 |
| <input type="checkbox"/> | Fixtures (Subtotal) Column 1 |

TOTAL FIXTURES

Fixture Fee
Transfer Fee

Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections!

PERMIT FEE (TOTAL)