

2016-02147



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 192 Delaware CRT

CBL:

PROPERTY OWNER(S) NAME

OWNER NAME: Bob Ringer

Applicant Name: Greg Chandonnet

Mailing Address of Owner/Applicant (if Different)

E Mail:

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] 8-3-16
Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2016-02147

Date Permit Issued 8/2/16 Fee: \$ 50.00 Double Fee Charged

Local Plumbing Inspector Signature [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. NEW PLUMBING
2. RELOCATED PLUMBING

RECEIVED
AUG 12 2016
Dept. of Building Inspections
City of Portland Maine

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:
Ctm Plumbing & Htg
NAME: Greg Chandonnet
1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER / MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # 112754

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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 / Silcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input 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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Water Heater
OR	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
<input type="checkbox"/> TRANSFER FEE (\$10.00)	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		4 TOTAL FIXTURES 40.00 Fixture Fee 10.00 Transfer Fee <u>Surcharge</u>	
Please call 874-8703 with your permit # to schedule inspections!		50.00 PERMIT FEE (TOTAL)		Hook-Up & Relocation Fee FEE

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
 389 Congress Street
 Portland, Maine 04101

PLUMBING PERMIT RECEIPT

Application No: 2016-02147	Applicant: RINGER ROBERT J & CAROLE E
Project Desc: Four (4) Plumbing Fixtures	Location: 192 DELAWARE CT
CBL: 343 C014N01	Plumber: CHANDONNET, GREG
Invoice Date: 08/12/2016	License #: MS90012754

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$50.00		\$50.00		\$0.00	On Receipt

Previous Balance **\$0.00**

Fee Description	Qty	Fee
Plumbing Permit Fee	1	\$40.00
Surcharge	1	\$10.00
Water Closet (Toilet)	1	\$10.00
Wash Basin	1	\$10.00
Sink	1	\$10.00
Shower (Separate)	1	\$10.00
		\$50.00

Total Current Payments: - **\$50.00**

Minimum Amount Due Now: **\$0.00**

CBL: 343 C014N01 **Application No:** 2016-02147
Bill to: RINGER ROBERT J & CAROLE E RINGER JTS
 192 DELAWARE CT
 PORTLAND, ME 04103

Invoice Date: 08/12/2016
Invoice No: 59312
Total Amt Due: \$0.00
Payment Amount: \$50.00

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.