



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 11 WALKLEY CT
 CBL: 372 Abon 030

PROPERTY OWNER(S) NAME

NAME: CAROLY FOSTER
 Applicant Name: Steve Foucher
 Mailing Address of Owner/Applicant (If Different): 134 South St

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: [Signature] Date: 2-27-14

Town/City PORTLAND Permit # 201400397

Date Permit Issued: 02/27/14 Fee: \$ 50 Double Fee Charged []

Local Plumbing Inspector Signature: [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

RECEIVED
FEB 27 2014
 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

OTHER-SPECIFY _____

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

Plumbing to be Installed by:

NAME: Steve Foucher

1 MASTER PLUMBER

2 OIL BURNERMAN

3 MFG'D HOUSING DEALER / MECHANIC

4 PUBLIC UTILITY EMPLOYEE

5 PROPERTY OWNER

LICENSE # MS90009684

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	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"/> Hosebib / Sillcock	<input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<u>01</u> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<u>01</u> Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<u>01</u> Clothes Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<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 type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
OR	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 1
<input type="checkbox"/> TRANSFER FEE (\$10.00)	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	<input type="checkbox"/> TOTAL FIXTURES
		<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!		PERMIT FEE (TOTAL)