



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	112 Summit St
CBL:	378 A001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Nicolas Pambrie
Applicant Name:	Dan Header
Mailing Address of Owner/Applicant (if Different)	
E Mail:	danheader@yahoo.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: 1-20-16

Town/City	PORTLAND	Permit #	201600165
Date Permit Issued	1/26/16	Fee: \$	120
		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.			
LPI Signature		Date Approved (Final)	

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p><i>Direct Replacement of fixtures</i></p> <p>RECEIVED JAN 26 2016 Dept. of Building Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Dan Header</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>MS191010149991</u></p>																																																		
<p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</p> <p><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</p>	<p>Column 2</p> <table border="1"> <thead> <tr> <th>Number</th> <th>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><input type="checkbox"/></td><td>Fixtures (Subtotal) Column 2</td></tr> </tbody> </table>	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	<p>Column 1</p> <table border="1"> <thead> <tr> <th>Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input checked="" type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Sink</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input checked="" 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><input type="checkbox"/></td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td><input type="checkbox"/></td><td>TOTAL FIXTURES</td></tr> </tbody> </table>	Number	Type of Fixture	<input checked="" type="checkbox"/>	Bathtub (and Shower)	<input type="checkbox"/>	Shower (separate)	<input checked="" type="checkbox"/>	Sink	<input checked="" type="checkbox"/>	Wash Basin	<input checked="" type="checkbox"/>	Water Closet (Toilet)	<input checked="" type="checkbox"/>	Clothes Washer	<input checked="" 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	<input type="checkbox"/>	TOTAL FIXTURES
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																																																			
Number	Type of Fixture																																																			
<input checked="" type="checkbox"/>	Bathtub (and Shower)																																																			
<input type="checkbox"/>	Shower (separate)																																																			
<input checked="" type="checkbox"/>	Sink																																																			
<input checked="" type="checkbox"/>	Wash Basin																																																			
<input checked="" type="checkbox"/>	Water Closet (Toilet)																																																			
<input checked="" type="checkbox"/>	Clothes Washer																																																			
<input checked="" 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																																																			
<input type="checkbox"/>	TOTAL FIXTURES																																																			
<p>OR</p> <p><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>	<p>Fees:</p> <p>\$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture</p>	<p>7110.00 Fixture Fee</p> <p>110.00 Transfer Fee</p> <p>120.00 Hook-Up & Relocation Fee</p> <p><i>Surcharge Fee</i></p>																																																		
<p>Please call 874-8703 with your permit # to schedule inspections!</p>		<p>\$120.00 PERMIT FEE (TOTAL)</p>																																																		