



11258

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 25 Harverlys Way

CBL: 384 A046

PROPERTY OWNER(S) NAME

NAME: Madd LLC

Applicant Name: Robert S Dow

Mailing Address of Owner/Applicant (if Different): 17 Milliken Rd. Scarborough Me. 04074

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.

Robert S Dow
Signature of Owner/Applicant Date 4-3-13

Town/City PORTLAND Permit # 201300644

Date Permit Issued 4/3/13 Fee: \$ 160 Double Fee Charged []

[Signature] L.P.I. # 360
Local Plumbing Inspector Signature

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

APR 03 2013

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:

NAME: Robert Dow

1. MASTER PLUMBER

2. OIL BURNERMAN

3. MFG'D HOUSING DEALER / MECHANIC

4. PUBLIC UTILITY EMPLOYEE

5. PROPERTY OWNER

LICENSE # 08566

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]

Number	Type of Fixture
<input checked="" type="checkbox"/> 2	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 checked="" type="checkbox"/> 2	Fixtures (Subtotal) Column 2
Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	

Number	Type of Fixture
<input checked="" type="checkbox"/> 1	Bathtub (and Shower)
<input checked="" type="checkbox"/> 1	Shower (separate)
<input checked="" type="checkbox"/> 1	Sink
<input checked="" type="checkbox"/> 4	Wash Basin
<input checked="" type="checkbox"/> 3	Water Closet (Toilet)
<input checked="" type="checkbox"/> 1	Clothes Washer
<input checked="" type="checkbox"/> 1	Dish Washer
<input checked="" type="checkbox"/> 1	Garbage Disposal
<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/>	Water Heater
<input checked="" type="checkbox"/> 13	Fixtures (Subtotal) Column 1
<input checked="" type="checkbox"/> 15	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! 160 PERMIT FEE (TOTAL)