



(802 Ocean)

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	830 OCEAN Ave.
CBL:	411 A007001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Colson & Colson Gen Cont.
Applicant Name:	CLIFF MYERS
Mailing Address of Owner/Applicant (if Different)	2303 Winford Ave. Nashville TN. 37211
E Mail:	CLIFFM@LMPUMBINGLLC.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: 3/13/17

Town/City PORTLAND Permit # 2017-07093

Date Permit Issued 3/13/17 Fee: \$7,930 Double Fee Charged

L.P.I. # 1081

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.

LPI Signature

Date Approved (Final)

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED MAR 13 2017 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>Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be installed by:</p> <p>NAME: <u>CLIFF MYERS</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>MS9101211691</u></p>
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	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"/> 9	Hosebib / Sillcock	<input type="checkbox"/> 17	Bathtub (and Shower) 17
	<input type="checkbox"/> 3	Floor Drain	<input type="checkbox"/> 150	Shower (separate) 150
	<input type="checkbox"/> 1	Urinal	<input type="checkbox"/> 61	Sink 61
	<input type="checkbox"/> 2	Drinking Fountain	<input type="checkbox"/> 181	Wash Basin 181
	<input type="checkbox"/> 15	Indirect Waste	<input type="checkbox"/> 179	Water Closet (Toilet) 179
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> 1	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> 19	Clothes Washer 19
	<input type="checkbox"/> 1	Grease / Oil Separator	<input type="checkbox"/> 1	Dish Washer
	<input type="checkbox"/> 10	Roof Drain	<input type="checkbox"/> 1	Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> 1	Bidet	<input type="checkbox"/> 8	Laundry Tub
	<input type="checkbox"/> 1	Other: <u>BOOSTER PUMP</u>	<input type="checkbox"/> 3	Water Heater
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
			792 TOTAL FIXTURES	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		Fixture Fee Transfer Fee	
			Hook-Up & Relocation Fee	
Please call 874-8703 with your permit # to schedule inspections!			PERMIT FEE (TOTAL)	