



# 11999

# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	46 Veranda St
CBL:	429 A001
PROPERTY OWNER(S) NAME	
NAME:	Pizza Time
Applicant Name:	Craig R. Aube
Mailing Address of Owner/Applicant (if Different)	19 Aube cresc way Fairmount ME
<b>Owner/Applicant Statement</b>	
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.	
	7/26/13
Signature of Owner/Applicant	Date

Town/City PORTLAND Permit # 2013 01615

Date Permit Issued 7/26/13 Fee: \$ 80 Double Fee Charged [ ]

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)

\_\_\_\_\_ Date Approved (Final)

\_\_\_\_\_ LPI Signature

PERMIT INFORMATION																																																																		
This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING  <div style="text-align: center;"> <b>RECEIVED</b>  <b>JUL 26 2013</b>            Dept. of Building Inspections            City of Portland Maine         </div>	<b>Type of Structure to be Served</b> 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Pizza store</u>	<b>Plumbing to be Installed by:</b> NAME: <u>Craig R Aube</u> <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>8878</u>																																																																
	Hook-Up & Piping, Relocation Maximum of 1 Hook-Up <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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR <input type="checkbox"/> TRANSFER FEE [\$10.00]	<table border="1"> <thead> <tr> <th>Column 2 Number</th> <th>Type of Fixture</th> <th>Column 1 Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td><td><input type="checkbox"/></td><td>Sink</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td><td><input checked="" type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td><td><input type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td><input type="checkbox"/></td><td>Other:</td><td><input type="checkbox"/></td><td>Water Heater</td></tr> <tr><td colspan="2"><b>Fixtures (Subtotal) Column 2</b></td><td colspan="2"><b>Fixtures (Subtotal) Column 1</b></td></tr> <tr><td colspan="2"><b>OR</b></td><td colspan="2"><b>TOTAL FIXTURES</b></td></tr> <tr><td colspan="2">Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge</td><td colspan="2">Fixtures Fee</td></tr> <tr><td colspan="2"></td><td colspan="2">Transfer Fee</td></tr> <tr><td colspan="2"></td><td colspan="2">Hook-Up &amp; Relocation Fee</td></tr> </tbody> </table>	Column 2 Number	Type of Fixture	Column 1 Number	Type of Fixture	<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	<input type="checkbox"/>	Sink	<input type="checkbox"/>	Drinking Fountain	<input checked="" 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"/>	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	<b>Fixtures (Subtotal) Column 2</b>		<b>Fixtures (Subtotal) Column 1</b>		<b>OR</b>		<b>TOTAL FIXTURES</b>		Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		Fixtures Fee				Transfer Fee				Hook-Up & Relocation Fee	
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