



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 57 1/2 Veranda St  
 CBL: \_\_\_\_\_

## PROPERTY OWNER(S) NAME

OWNER NAME: Pamela & Steven Starbuck  
 Applicant Name: Brendan Holmes  
 Mailing Address of Owner/Applicant (if Different): 6 Marston St Falmouth Me  
 E Mail: \_\_\_\_\_

### 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.

Brendan Holmes 5-15/2017  
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2017-07186  
 Date Permit Issued 5/15/17 Fee: \$ 130.00 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.

[Signature] \_\_\_\_\_  
 LPI Signature Date Approved (Final)

## PERMIT INFORMATION

This Application is for  
 1.  NEW PLUMBING  
 2.  RELOCATED PLUMBING

RECEIVED  
 MAY 15 2017  
 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: Brendan Holmes  
 1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG'D HOUSING DEALER / MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 5.  PROPERTY OWNER

LICENSE # ME-1910101121312191

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 checked="" type="checkbox"/> 2 Hosebib / Sillcock	<input type="checkbox"/> 1 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"/> 2 Wash Basin
	<input type="checkbox"/> Indirect Waste	<input checked="" type="checkbox"/> 2 Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1
OR		<input checked="" type="checkbox"/> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE (\$10.00)	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<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)