



# PLUMBING PERMIT APPLICATION

**PROPERTY ADDRESS**  
 Street: 220 Veranda  
 CBL: 432 E004001

**PROPERTY OWNER(S) NAME**  
 OWNER NAME: Rich Mioli  
 Applicant Name: Jim Jackson

Mailing Address of Owner/Applicant (if Different)  
 E Mail: PORTSIDE1@MAINE.PRC.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.  
Jim Jackson 3-22-16  
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2016-00647  
 Date Permit Issued 3/21/16 Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]  
 Local Plumbing Inspector Signature [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

This Application is for

1.  NEW PLUMBING  
 2.  RELOCATED PLUMBING

**RECEIVED**  
 MAR 21 2016  
 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: Jim Jackson

1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG'D HOUSING DEALER / MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 5.  PROPERTY OWNER

LICENSE # MS 11127311

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"/>	Hosebib / Sillcock	<input checked="" type="checkbox"/>	Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Floor Drain	<input checked="" type="checkbox"/>	Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input checked="" type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input checked="" 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 checked="" type="checkbox"/>	Water Heater
<b>OR</b>	<b>Fixtures (Subtotal) Column 2</b>		<b>Fixtures (Subtotal) Column 1</b>	
	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<b>TOTAL FIXTURES</b>	
TRANSFER FEE \$10.00			Fixtures Fee	
			Transfer Fee	
			Hook-Up & Relocation Fee	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<u>\$120</u>		<b>PERMIT FEE (TOTAL)</b>