

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering

Town Or Plantation	PORTLAND
Street Subdivision Lot #	122 NORTH ST
Last: ROY DETROY	First: MARY PETER
Applicant Name:	CARLO DORIA PLS+HHS INC
Mailing Address of Owner/Applicant (if Different)	10 STONECREST DR PORTLAND, ME 04103

2004-8109

Date Permit Issued: 3 6 04	PEANBY # 9889	STATE # 260	If Double Fee Charged
Local Plumbing Inspector Signature		L.P.I. # 360	

042665 012 No 16

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 to deny a Permit.

Carlo Doria
Signature of Owner/Applicant

3/31/04
Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature

Date Approved

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type Of Structure To Be Served: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER — SPECIFY _____	Plumbing To Be Installed By: 1. <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 # 07167
---	--	---

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR TRANSFER FEE [\$6.00]	2	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	3	Wash Basin
		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	2	Fixtures (Subtotal) Column 2	13	
			2	Total Fixtures
			\$	
			\$	
			\$	
			\$ 96.	Permit Fee (Total)

CHH 6700

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

10 surcharge