

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	Portland
Street	35 Murray St
Subdivision Lot #	

PROPERTY OWNERS NAME

Last: <u>McHarvey</u>	First: <u>Kathleen</u>
Applicant Name: <u>Tom James</u>	
Mailing Address of Owner/Applicant (if Different): <u>19 West St Portland ME</u>	

PORTLAND Permit Issued: 3/21/06 7205 \$ 24 TOWN COPY If Double Fee Charged

O. Samuel Hoffer L.P.I. # C124

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 Inspectors to deny a Permit.

Signature of Owner/Applicant

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

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>Type of Structure To Be Served:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p>Plumbing To Be Installed By:</p> <p>1. <input 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>2123</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center; font-size: 2em;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p>		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Urinal		Sink
		Drinking Fountain		Wash Basin
<p style="text-align: center; font-size: 2em;">OR</p> <p>TRANSFER FEE [\$6.00]</p>		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
			3	Fixtures (Subtotal) Column 2
			3	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

16-C-005