

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

Town or Plantation	PORTLAND, ME
Street Subdivision Lot #	58 FORE ST
<b>PORTLAND COMPANY</b> Last: First:	
Applicant Name:	JOHN HANFORD
Mailing Address of Owner/Applicant (If Different)	454 OCEAN ST SO. PORTLAND, ME 04106

PORTLAND	PERMIT # 8740	STATE COPY	<input type="checkbox"/> Double Fee
Date Permit Issued: 1/13/04	\$ 154.00	FEE Charged	
<i>Shawnal Wray</i> Local Plumbing Inspector Signature		L.P.I. # 1608	

## 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]* 1/13/04  
Signature of Owner/Applicant 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

- ☒ NEW PLUMBING
- ☐ RELOCATED PLUMBING

## Type of Structure To Be Served:

- ☐ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☒ OTHER - SPECIFY Commercial Space

## Plumbing To Be Installed By:

- ☒ MASTER PLUMBER
- ☐ OIL BURNERMAN
- ☐ MFG'D. HOUSING DEALER/MECHANIC
- ☐ PUBLIC UTILITY EMPLOYEE
- ☐ PROPERTY OWNER

LICENSE # 02754

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture	Column 1 Type of Fixture
<b>OR</b> <b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.  <b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.	Number: 0, 1 Hosebibb / Silcock	Number: 0, 1 Bathtub (and Shower)
	Number: 0, 1 Floor Drain	Number: 0, 1 Shower (Separate)
	Number: 0, 1 Urinal	Number: 0, 1 Sink
	Number: 0, 2 Drinking Fountain	Number: 0, 2 Wash Basin
	Number: 0, 3 Indirect Waste	Number: 0, 3 Water Closet (Toilet)
	Number: 0, 1 Water Treatment Softener, Filter, etc.	Number: 0, 1 Clothes Washer
	Number: 0, 1 Grease / Oil Separator	Number: 0, 1 Dish Washer
	Number: 0, 1 Dental Cuspidor	Number: 0, 1 Garbage Disposal
	Number: 0, 1 Bidet	Number: 0, 1 Laundry Tub
	Number: 0, 1 Other: _____	Number: 0, 1 Water Heater
<b>OR</b> <b>TRANSFER FEE</b> [\$6.00]	<b>Fixtures (Subtotal)</b> Column 2 0, 7	<b>Total Fixtures</b> 0, 1
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>		<b>Permit Fee (Total)</b> 54.00

#1,544

54.00