

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation	Portland
Street	1011
Subdivision Lot #	

## PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

05 8371

PORTLAND PERMIT # 2594 TOWN COPY

Date Permit Issued: 10/14/05 \$ 2400  If Double Fee Charged

*Carney Weiser* L.P.I. # 360  
Local Plumbing Inspector Signature

27 F 001

### 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 \_\_\_\_\_ 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 \_\_\_\_\_

## PERMIT INFORMATION

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

EXPIRED

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE