

PLUMBING APPLICATION

027-24-202

PROPERTY ADDRESS

Town Or Plantation: Portland ME
Street Subdivision Lot #: 13-15 Franklin St

PROPERTY OWNERS NAME

Last: A & M Partners First: _____
Applicant Name: Craig R. Abbe
Mailing Address of Owner/Applicant (If Different): 16 Leonard St Portland ME

PORTLAND Date Permit Issued: 3.9.98 6392 \$ 11.00 TOWN COPY If Double Fee Charged
L.P.I. # 0128
Local Plumbing Inspector Signature: G. Samuel Hayes

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.

Caution: Inspection Required

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

Signature of Owner/Applicant: Craig R. Abbe Date: 3/17/98

Local Plumbing Inspector Signature: Max Landberg Date Approved: 3/17/98

PERMIT INFORMATION

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 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 _____	Plumbing To Be Installed By: 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 # <u>6616</u>

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.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
OR TRANSFER FEE [\$6.00]		Bidet		Laundry Tub
		Other: _____	3	Water Heater
		Fixtures (Subtotal) Column 2	15	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE