

**PLUMBING APPLICATION**

Department of Health and Human Services  
Division of Environmental Health

**PROPERTY ADDRESS**

Town or Plantation: PORTLAND  
 Street Subdivision Lot #: 11 & PORTLAND PIER  
**PROPERTY OWNERS NAME**  
 Last: BROWN First: CINDY  
 Applicant Name: BRIAN WITHAM  
 Mailing Address of Owner/Applicant (If Different): 5 PORTLAND PIER

2009-8234

PORTLAND PERMIT # 11112 TOWN COPY  
 Date Permit Issued: 11/16/09 \$ 112.00 FEE Charged  Double Fee  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 0744  
 30-H-18

**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: [Signature] Date: 16 NOV 2009

**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: [Signature] Date Approved: 16 NOV 2009

**PERMIT INFORMATION**

<b>This Application is for</b> 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" 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 <u>BUSINESS</u>	<b>Plumbing To Be Installed By:</b> 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 # <u>MS 90009523</u>
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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
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b>  HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
<b>OR</b> TRANSFER FEE (\$6.00)		Drinking Water		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Other: <u>MOP SINK</u>		Laundry Tub
		Fixtures (Subtotal) Column 2		Water Heater
			0.1	Fixtures (Subtotal) Column 1
			0.1	Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

RECEIVED  
 NOV 16 2009  
 Dept. of Building Inspections  
 City of Portland, Maine

9-17-09

Mop sink installed  
requested <sup>existing</sup> present be removed + vented to  
vent to exterior