

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

| | |
|--------------------------|-------------------------|
| Town or Plantation | Portland Me. |
| Street Subdivision Lot # | 36 Market St. 1st floor |

PROPERTY OWNERS NAME

| | |
|---|--|
| Last: | First: |
| Applicant Name: | Norine DiBiase |
| Mailing Address of Owner/Applicant (If Different) | 52 Constitution Drive Westbrook Me. |

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

PORTLAND

PERMIT # 10492 TOWN COPY

Date Permit Issued:

12/28/09

\$

9.00

Double Fee Charged

L.P.I. # 1081

Local Plumbing Inspector Signature

030 F002

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

| | | |
|--|---|---|
| This Application Is for 1. <input 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 <u>Sandwich Shop</u> | Plumbing To Be Installed By: 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>102920</u> |
|--|---|---|

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | Column 2 Type of Fixture | | Column 1 Type of Fixture | |
|--|-----------------------------|--|-----------------------------|------------------------------|
| | Number | Type of Fixture | Number | Type of Fixture |
| <input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system. | | Hosebib / Sillcock | | Bathtub (and Shower) |
| | | Floor Drain | | Shower (Separate) |
| <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Urinal | 1 | Sink <u>3 Bay prep sink</u> |
| | | Drinking Fountain | 2 | Wash Basin <u>Hand Sinks</u> |
| OR <input type="checkbox"/> TRANSFER FEE [\$6.00] | | Indirect Waste | | Water Closet (Toilet) |
| | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | | Grease / Oil Separator | | Dish Washer |
| | | Roof Drain | | Garbage Disposal |
| | | Bidet | 1 | Laundry Tub |
| | | Other: _____ | | Water Heater |
| | | Fixtures (Subtotal) Column 2 | | 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

410

1423

TOWN COPY