

02/02/05 OKAY TO USE ~~AND~~
CLOSE OUT PERMIT

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	One Monument Sq

PROPERTY OWNERS NAME

Last: <u>Franco</u>	First: <u>Robert</u>
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Applicant Name	A. Tomp
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Mailing Address of Owner/Applicant (If Different)	11 Ballard Ave 5 Portland ME 04106
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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

32 K CIR

PORTLAND Date Permit Issued: <u>12/23/04</u>	PERMIT # <u>9216</u>	TOWN COPY \$ <u>172.00</u> FEE Double Fee Charged
<u>Michael Wang</u> Local Plumbing Inspector Signature		L.P.I. # <u>1608</u>

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

OH/2/05
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>Office Building</u>	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFGD. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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.	<input type="checkbox"/> Hosebibb/ Sillcock	<input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Urinal	<input type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, etc.	<input type="checkbox"/> Clothes Washer
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> Dish Washer
	<input type="checkbox"/> Dental Cuspidor	<input type="checkbox"/> Garbage Disposal
<input type="checkbox"/> Bidet	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Water Heater	
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 1
	9	9
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 2
	2	2
	<input type="checkbox"/> Total Fixtures	<input type="checkbox"/> Total Fixtures
	11	11
	<input type="checkbox"/> Fixture Fee	<input type="checkbox"/> Fixture Fee
	<input type="checkbox"/> Transfer Fee	<input type="checkbox"/> Transfer Fee
	<input type="checkbox"/> Hook-Up & Relocation Fee	<input type="checkbox"/> Hook-Up & Relocation Fee
	<input type="checkbox"/> Permit Fee (Total)	<input type="checkbox"/> Permit Fee (Total)
	72	72

$72 + 10 = 82.00$