Department of Human Services Division of Health Engineering PLUMBING APPLICATION (67 PROPERTY ADDRESS Town Or Plantation Street Subdivision Lot # OWNERS NAME Applicant Name: Mailing Address of Owner/Applicant (If Different) Caution: Inspection Required **Owner/Applicant Statement** I certify that the information submitted is correct to the best of my have inspected the installation authorized above and found it to be knowledge and understand that any falsification is reason for the Local compliance with the Maine Plumbing Rules. Plumbîng Inspector to deny a Permit. 1-23-Signature of Owner/Applicant Date Approved PERMIT INFORMATION This Application is for Type Of Structure To Be Served: Plumbing To Be Installed By: 1. MASTER PLUMBER 1. □ SINGLE FAMILY DWELLING 1. DY NEW PLUMBING 2. OIL BURNERMAN 2. MODULAR OR MOBILE HOME 2. RELOCATED 3. MFG'D. HOUSING DEALER / MECHANIC **PLUMBING** 3. MULTIPLE FAMILY DWELLING 4. PUBLIC UTILITY EMPLOYEE 4. □ OTHER — SPECIFY _ 5. PROPERTY OWNER LICENSE # 1215141 Column 2 Column 1 Hook-Up & Piping Relocation Maximum of 1 Hook-Up Type of Fixture Number Number Type of Fixture Hosebibb / Sillcock Bathtub (and Shower) HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. Floor Drain Shower (Separate) Urinal Sink **Drinking Fountain** Wash Basin <u>HOOK-UP:</u> to an existing subsurface wastewater disposal system. Indirect Waste Water Closet (Toilet) PIPING RELOCATION: of sanitary lines, drains, and piping without Water Treatment Softener, Filter, etc. Clothes Washer new fixtures. Grease / Oil Separator Dish Washer

Dental Cuspidor Garbage Disposal OR **Bidet** Laundry Tub Other: Water Heater TRANSFER FEE Fixtures (Subtotal) [\$6.00] **Fixtures (Subtotal)** Column 2 Column 1 Fixtures (Subtotal) Column 2 **Total Fixtures** SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE **Fixture Fee** Transfer Fee \$ Hook-Up & Relocation Fee \$ Permit Fee Page 1 of 1 HHE-211 Rev. 6/94 \$ (Total)

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