

**PLUMBING APPLICATION**

# 11219

Department of Health and Human Services  
Division of Environmental Health

**PROPERTY ADDRESS:**

Town or Plantation	Portland	
Street Subdivision Lot #	269 Commercial ST 2A Harbor Landing	
<b>PROPERTY OWNERS NAME:</b>		
MGM Old Port LLC		
Last:	First:	
Applicant Name:	ERROL Woodbury	
Mailing Address of Owner/Applicant (if Different)	168 Pond Rd. Manchester, ME 04351	
<b>Owner/Applicant Statement</b>		
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.		
Errol Woodbury		3/6/13
Signature of Owner/Applicant		Date

Permit # 201300137

**Caution: Permit Required**

Plumbing shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing in accordance with this application and the Maine Plumbing Rules.

038 6002

**Caution: Inspection Required**

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

RECEIVED

Local Plumbing Inspector Signature: [Signature]

Date Approved: 9/5/2013 \$360

**PERMIT INFORMATION**

<b>This Application is for</b>	<b>Type of Structure To Be Served:</b>	<b>Dept. of Building Inspections City of Portland, ME</b>
1. <input type="checkbox"/> NEW PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY <u>Condo</u>	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>114628</u>

038 6002

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> <b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.		Hosebib / Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
<input type="checkbox"/> <b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
<input type="checkbox"/> <b>TRANSFER FEE (\$6.00)</b>		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
<b>OR</b>		Grease / Oil Separator	1	Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	1	Water Heater
		<b>Fixtures (Subtotal) Column 2</b>	0.6	<b>Fixtures (Subtotal) Column 1</b>
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				<b>Fixtures (Subtotal) Column 2</b>
				<b>Total Fixtures</b>
				<b>Fixture Fee</b>
				<b>Transfer Fee</b>
				<b>Hook-Up &amp; Relocation Fee</b>
				<b>Permit Fee (Total)</b>

Owner  Town  State Copy

70

Portland 874-8703

389 Congress

8AM