

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	101 York St
PROPERTY OWNERS NAME	
SDL FOOD GROUP LLC	
Last	First
Applicant Name	Brian Gagne
Mailing Address of Owner/Applicant (If Different)	10 Forest Lane Cumberland, Maine

40-C-22

PORTLAND

Date Permit Issued: 1/30/09

PERMIT # 10870 TOWN COPY

\$ [ ] FEE Charged  # Double Fee Charged

Local Plumbing Inspector Signature: Deanne Bowke L.P.I. # 07321

2008.8362

## 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.

## Caution: Inspection Required

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

Signature of Owner/Applicant: [Signature] Date: 1-30-09

Local Plumbing Inspector Signature: [Signature] Date Approved: 05/14/09

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input 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 _____	<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>7628</u>
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SCANNED

### Hook-Up & Piping Relocation Maximum of 1 Hook-Up

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.

OR

HOOK-UP: to an existing subsurface wastewater disposal system.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE  
\$[ ] (\$6.00)

Column 2 Number	Column 2 Type of Fixture	Column 1 Number	Column 1 Type of Fixture
	Floor Drain		Bathtub (and Shower)
	Urinal	3	Shower (Separate)
	Drinking Fountain	3	Sink
2	Indirect Waste	2	Wash Basin
	Water Treatment Softener, Filter, etc.		Water Closet (Toilet)
1	Grease / Oil Separator	1	Clothes Washer
	Roof Drain		Dish Washer
	Bidet		Garbage Disposal
	Other: _____	1	Laundry Tub
3	Fixtures (Subtotal) Column 2	10	Water Heater
		3	Fixtures (Subtotal) Column 1
		13	Fixtures (Subtotal) Column 2
			<b>Total Fixtures</b>
			Fixture Fee
			Transfer Fee
			Hook-Up & Relocation Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

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