

2017-07108

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PLUMBING APPLICATION		Department of Health and Human Services Division of Environmental Health	
PROPERTY ADDRESS			
Town or Plantation <u>Panther</u>		Permit # _____	
Street or Subdivision Lot # <u>747 Congress St. Panther</u>		Date Permit Issued <u>3/24/17</u> Fee: \$ _____ Double Fee Charged []	
PROPERTY OWNER(S) NAME			
Last: <u>747 Congress LLC / The Francis Hotel</u>		Local Plumbing Inspector Signature _____ L.P.I. # _____	
Applicant Name: <u>Pine State Services</u>		Fee: \$ _____ State min. fee \$ _____ Locally adopted fee _____	
Mailing Address of Owner/Applicant (if Different): <u>3 Eisenhower Dr. Scarborough ME</u>		Copy: [] Owner [] Town [] State Map # _____ Lot # _____ Local _____	
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 Inspector(s) to deny a permit.			
Signature of Owner/Applicant _____		Date <u>3-22-17</u>	
Caution: Inspection Required			
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.			
		Date Approved (Rough-in) _____	
		Date Approved (Final) _____	
PERMIT INFORMATION			
This Application is for	Type of Structure to be Served	Plumbing to be Installed by:	
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING <div style="text-align: center; opacity: 0.5;">RECEIVED MAR 24 2017</div>	1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Hotel kitchen</u>	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>2501</u>	
Hook-Up & Piping Relocation Maximum of 1 Hook-Up		Column 1 Type of Fixture	
<input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.		Number <u>02</u> Hosebib / Sillcock <u>03</u> Floor Drain <u>03</u> Indirect Waste	Number <u>04</u> Bathtub (and Shower) <u>15</u> Shower (separate) <u>08</u> Sink <u>20</u> Wash Basin <u>18</u> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		Number <u>01</u> Water Treatment Softener, Filter, Etc. <u>01</u> Grease / Oil Separator <u>03</u> Roof Drain	Number <u>01</u> Clothes Washer <u>02</u> Dish Washer <u>01</u> Garbage Disposal <u>01</u> Laundry Tub <u>01</u> Water Heater
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Number <u>17</u> Bidet Other: _____ <u>17</u> Fixtures (Subtotal) Column 2	Number <u>67</u> Fixtures (Subtotal) Column 1 <u>12</u> Fixtures (Subtotal) Column 2 <u>79</u> TOTAL FIXTURES
OR		TRANSFER FEE	
<input checked="" type="checkbox"/> TRANSFER FEE \$10.00		SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	
		PERMIT FEE (TOTAL)	
		<input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input type="checkbox"/> State Copy	