

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation: M.A.C. Richards  
 Street Subdivision Lot #: 3rd floor - 22 Bramhall

## PROPERTY OWNERS NAME

Last: Foot First: Dana  
 Applicant Name: Johnson + Jordan  
 Mailing Address of Owner/Applicant (If Different): 18 Missisquoi Road, Southbury, Maine

#2

1004 8279

PORTLAND Date Permit Issued: 01/21/04 8994 TOWN COPY \$ 102.00  If Double Fee Charged  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 06180

053 007

## 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] 7-06-04  
 Signature of Owner/Applicant Date

## Caution: Inspection Required

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

[Signature] 03/24/09  
 Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

<p><b>This Application is for</b></p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING                  2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></p> <p>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>Hospital</u></p>	<p><b>Plumbing To Be Installed By:</b></p> <p>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>MS 9,0002461</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b>		Urinal	4	Sink
		Drinking Fountain	6	Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	6	Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
				Laundry Tub
				Water Heater
<b>OR</b>		Fixtures (Subtotal) Column 2	14	Fixtures (Subtotal) Column 1
	TRANSFER FEE \$[6.00]			Fixtures (Subtotal) Column 2
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				
			14	<b>Total Fixtures</b>
			75.00	Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

**EXPIRED**