

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 25 Crescent St

PROPERTY OWNERS NAME

Last: Crescent Heights LLC First: _____

Applicant Name: Granite Corp

Mailing Address of Owner/Applicant (If Different): Po Box 370
Oakland Me

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 of Owner/Applicant: James E. Kay

Date: 5/26/09

PORTLAND

PERMIT # 11039 TOWN COPY

Date Permit Issued: 18 08 09

\$ 1,546

If Double Fee Charged

Local Plumbing Inspector Signature: Jeanne Banke

L.P.I. # 01732

Caution: Inspection Required

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

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

1. NEW PLUMBING
2. RELOCATED PLUMBING

Type of Structure To Be Served:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D. HOUSING DEALER/MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # 12505

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]

| Number | Column 2 Type of Fixture | Number | Column 1 Type of Fixture |
|--------|----------------------------------------|--------|---------------------------------|
| 2 | Hosebib / Sillcock | 1 | Bathtub (and Shower) |
| 4 | Floor Drain | 1 | Shower (Separate) |
| 1 | Urinal | 1 | Sink |
| 1 | Drinking Fountain | 2 | Wash Basin |
| 1 | Indirect Waste | 2 | Water Closet (Toilet) |
| 1 | Water Treatment Softener, Filter, etc. | 1 | Clothes Washer |
| 1 | Grease / Oil Separator | 1 | Dish Washer |
| 4 | Roof Drain | 1 | Garbage Disposal |
| 1 | Bidet | 1 | Laundry Tub |
| 1 | Other: _____ | 1 | Water Heater |
| 1 | Fixtures (Subtotal) Column 2 | 1 | Fixtures (Subtotal) Column 1 |
| 1 | | 1 | Fixtures (Subtotal) Column 2 |
| 1 | | 1 | Total Fixtures |
| 1 | | 1 | Fixture Fee |
| 1 | | 1 | Transfer Fee |
| 1 | | 1 | Hook-Up & Relocation Fee |
| 1 | | 1 | Permit Fee (Total) |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY