

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
Street: 7 Bramhall
Subdivision Lot #

PROPERTY OWNERS NAME

Last: Waterman First:
Applicant Name: Darby Plumbing Heating
Mailing Address of Owner/Applicant (If Different): 27 VANAN Ave Portland, ME 04103

2004 8123

Date Permit Issued: 4/12/04 \$ 1115.00 If Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 06180

63 A 006

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: [Signature] Date: 4/12/04

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	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	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>Medical Building</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>07169</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
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.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>1</u>	Sink
		Drinking Fountain	<u>0</u>	Wash Basin
OR TRANSFER FEE (\$6.00)		Indirect Waste	<u>0</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>22</u>	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE $\begin{array}{r} 198 \\ + 10 \\ \hline 208 \end{array}$			<u>22</u>	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixtures Fee
				Transfer Fee
				Hook-Up / Piping Fee
			<u>198</u>	Permit Fee (Total)