

## PLUMBING PERMIT APPLICATION

| PROPERTY ADI   | I DOTALDITA  | עוני או פ   | TATAL TATE                                       | LICATION                            |   |         |               |                |                           |                       |
|--|--|---|--|-------------------------------------|---|---------|---------------|----------------|---------------------------|-----------------------|
| Street: 186-188 Dartmouth St   |  | Town/City PORTLAND  |  | Permit #                            |   |         |               |                |                           |                       |
| CBL:   |  |   |  |                                     |   |         |               |                |                           |                       |
| PROPERTY OWNER(S) NAME   |  | Date Permit Issued/   |  |                                     |   |         |               |                |                           |                       |
| OWNER NAME:  April St Apts (LC   |  | Local Plumbing Inspector Signature  |  |                                     |   |         |               |                |                           |                       |
| Mailing Address of Tapley  |  | The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.  Caution: Inspection Required  I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application. |  |                                     |   |         |               |                |                           |                       |
| Mailing Address of Owner/Applicant P.O. Box 286  Owner/Applicant P.O. Box 286  (if Different) Biddle for el ME 04005  E Mail: another plumber coahotmaril. Com  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   |         | LPI Signature |                |                           | Date Approved (Final) |
|  |  |   |  |                                     |   | PERMITI | NFORMATION    | REAL PROPERTY. | Haran Maria Cara de Maria | (i iiiai)             |
| This Application is for  |  |   |  | Secretary and the second            |   |         |               |                |                           |                       |
|  | Type of Struc  |   | Plumbing to be                                   | Installed by:                       |   |         |               |                |                           |                       |
| 1. D'NEW PLUMBING  | 1. SINGLE FAMIL  | YRESIDENCE  | NAME: Corey Tapley                               |                                     |   |         |               |                |                           |                       |
| 2.   RELOCATED PLUMBING  | 2.   MODULAR OR MOBILE HOME                                  |   | 1. MASTER PLUMBER                                |                                     |   |         |               |                |                           |                       |
|  | 3. D MULTIPLE FAMILY DWELLING                                |   | 2.   OIL BURNERMAN                               |                                     |   |         |               |                |                           |                       |
|  | 4. □ OTHER-SPECIFY Please call 874-8703 with your            |   | 3. MFG'D HOUSING DEALER / MECHANIC               |                                     |   |         |               |                |                           |                       |
|  |  |   | 4. PUBLIC UTILITY EMPLOYEE                       |                                     |   |         |               |                |                           |                       |
|  | permit # to sch  | nedule inspections!   | 5. PROPERTY OWNER                                |                                     |   |         |               |                |                           |                       |
| Hook Lin 9 Dining Data atten   | Hook-Up & Piping Relocation Column 2                         |   | LICENSE # 191011121219171                        |                                     |   |         |               |                |                           |                       |
| Maximum of 1 Hook-Up   | Column 2 Number Type of Fixture                              |   | Numbe  | Column                              | The last term of the contract |         |               |                |                           |                       |
| HOOK-UP: to public sewer by  | _ Hosebib / Si   |   | 7  | · · · · · · · · · · · · · · · · · · | e of Fixture  |         |               |                |                           |                       |
| those cases where the  | Floor Drain  |   |  | Shower (sepa                        |   |         |               |                |                           |                       |
| connection is not regulated and  | _  Urinal  |   | <del>                                     </del> | Sink                                | arate)  |         |               |                |                           |                       |
| inspected by the local sanitary district.  | Drinking Fou   |   | 117  | Wash Basin                          | -   |         |               |                |                           |                       |
| HOOK-UP: to an existing subsurface   | Indirect Was   |   |  | Water Closet                        | (Toilet)  |         |               |                |                           |                       |
| wastewater disposal system   | Water Treatment Softener, Filter,Etc.                        |   | _  Clothes Washer                                |                                     |   |         |               |                |                           |                       |
|  | _   Grease / Oil   | Separator   | 긴 Dish Washer                                    |                                     |   |         |               |                |                           |                       |
| I I DIDING DELOCATION - 1  | Roof Drain   |   |  | Garbage Disp                        | osal  |         |               |                |                           |                       |
| PIPING RELOCATION: of sanitary   | Bidet  |   |  | Laundry Tub                         | Juli  |         |               |                |                           |                       |
| lines, drains, and piping without new fixtures.  | Other:   |   |  | Water Heater                        |   |         |               |                |                           |                       |
| OR   | Fixtures (Subt   | otal) Column 2  | LLI  | Fixtures (Subto                     | tal) Column 1   |         |               |                |                           |                       |
| - OA   |  | ees:  |  |                                     | FIXTURES  |         |               |                |                           |                       |
| TRANSFER FEE [\$10.00]   | les:<br>  fixtures = \$50 Minimum<br>  charge + \$10/fixture | Fixture Fee Transfer Fee  |  |                                     |   |         |               |                |                           |                       |
|  |  |   |  |                                     | elocation Fee   |         |               |                |                           |                       |
| Please call 874-8703 with your pe  | ermit#to schedule  | inspections!  |  | NAME OF TAXABLE PARTY.              | MIT FEE (TOTAL)   |         |               |                |                           |                       |