

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

892-6331

Town or Plantation: PRAKES ISLAND
Street: 414 ISLAND AVE
Subdivision Lot #: _____

Last Name: O'SULLIVAN **First Name:** JOHN
Applicant Name: HOLLY TUBBS
Mailing Address of Owner/Applicant (if Different): WATER SYSTEMS INC
153 ROOSEVELT TR.
WINDHAM, ME

Owner/Applicant Statement 04062
 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] 1/27/04
 Signature of Owner/Applicant Date

2004-8026

Date Permit Issued: 1/29/04 \$ 30.00 If Double Fee Charged
[Signature]
 Local Plumbing Inspector Signature L.P.I. # 0736

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 _____

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 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>02403</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number	Column 2 Type of Fixture	Column 1 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. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock	<u>1</u>	<u>Whirlpool</u> Bathub (and Shower)
		Floor Drain	<u>1</u>	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	<u>1</u>	Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	<u>1</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		
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				Total Fixtures
				Permit Fee (Total)

ck# 8759 $\frac{30}{10} = 40$