

PERMIT # 1154 PORTLAND BUILDING PERMIT APPLICATION DATE 9/26/87

1. Owner name Arthur's West Motel - Planning Council Tel. 775-3195  
 2. Lessee's name \_\_\_\_\_  
 3. Contractor's name Laska Construction Inc. Tel. 545-6441  
 4. Is this a legally recorded lot? yes X no \_\_\_\_\_  
 II. DESCRIPTION OF WORK: to construct 4-family house as per plans

III. BUILDING DIMENSIONS: length 30 width 20 square footage 4,200 height 11 #stories 2  
 IV. ZONE \_\_\_\_\_  
 Setbacks: front \_\_\_\_\_ back \_\_\_\_\_ side \_\_\_\_\_  
 Zoning board approval: no  yes  date \_\_\_\_\_  
 Planning board approval: no  yes  date \_\_\_\_\_  
 V. REVIEW REQUIRED: variance \_\_\_\_\_ other \_\_\_\_\_ floodplain mgmt \_\_\_\_\_  
 VI. FEES: site plan \_\_\_\_\_ subdivision \_\_\_\_\_  
 late fee \_\_\_\_\_ other fees \_\_\_\_\_ TOTAL \_\_\_\_\_

VII. DETAILS OF WORK  
 1. WATER SUPPLY:  public  private  
 2. SEWER:  public  private  
 3. HEAT: type \_\_\_\_\_ fuel \_\_\_\_\_  
 4. FOUNDATION: type \_\_\_\_\_ footing \_\_\_\_\_ thickness \_\_\_\_\_  
 5. ROOF: type \_\_\_\_\_ pitch \_\_\_\_\_ covering \_\_\_\_\_ load \_\_\_\_\_  
 6. PLUMBING: SPRINKLER SYSTEM? yes  no   
 7. ELECTRICAL: service entrance size \_\_\_\_\_ # smoke detectors \_\_\_\_\_  
 8. CHIMNEY: # flues \_\_\_\_\_ # fireplaces \_\_\_\_\_  
 9. FRAMING: floor joists \_\_\_\_\_ ceiling joists \_\_\_\_\_ rafters \_\_\_\_\_ max. on center \_\_\_\_\_  
 10. If 1-story building w/masonry: height \_\_\_\_\_ thickness \_\_\_\_\_ sill height \_\_\_\_\_  
 11. BEDROOM WINDOWS: sill height \_\_\_\_\_ height \_\_\_\_\_ width \_\_\_\_\_ egress window? yes  no   
 VIII. OFFICE USE: TAX MAP # \_\_\_\_\_  
 LOT # \_\_\_\_\_  
 VALUE/STRUCTURE \_\_\_\_\_  
 PERMIT EXPIRATION: \_\_\_\_\_  
 CODE:  other, explicit  if other, explain \_\_\_\_\_  
 X. PROPOSED USE: 1-4 @ 4 family  
 XI. PAST USE: \_\_\_\_\_  
 XII. OWNERSHIP: PUBLIC \_\_\_\_\_ PRIVATE \_\_\_\_\_  
 XIII. EST. CONSTRUCTION COST: 14,800  
 XIV. GR. SQ. FT. OF LOT \_\_\_\_\_ BUILDING \_\_\_\_\_  
 COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY: BEDROOMS \_\_\_\_\_  
 # NEW DWELLING UNITS WITH: 1 BDRM \_\_\_\_\_ 2 BDRMS \_\_\_\_\_ 3 BDRMS \_\_\_\_\_  
 # EXISTING DWELLING UNITS WITH: \_\_\_\_\_  
 # NEW DWELLINGS \_\_\_\_\_  
 # EXISTING DWELLINGS \_\_\_\_\_  
 TOTAL RESIDENTIAL UNITS \_\_\_\_\_  
 XVI. # RESIDENTIAL UNITS: \_\_\_\_\_  
 # NEW DWELLINGS \_\_\_\_\_  
 # EXISTING DWELLINGS \_\_\_\_\_  
 TOTAL RESIDENTIAL UNITS \_\_\_\_\_  
 MISCELLANEOUS: Will work require disturbing of any tree on a public street? \_\_\_\_\_  
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? \_\_\_\_\_  
 APPROVALS BY: BUILDING INSPECTION - PLAN EXAMINER \_\_\_\_\_  
 ZONING \_\_\_\_\_  
 C.E.O. \_\_\_\_\_  
 FIRE DEPT \_\_\_\_\_  
 NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical, and mechanicals.

District No. \_\_\_\_\_  
 XVII. SIGNATURE OF APPLICANT \_\_\_\_\_  
 TYPE NAME OF ABOVE Lee Porter  
 PHONE # 247-1136  
 1-2-3-4 \_\_\_\_\_  
 White - 3900 Green - Applicant Val w - Assessor Pink - Office File Gold - Field Inspector

SEP 10 1987  
 City of Portland  
 PERMIT ISSUED



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date August 25, 19 87  
 Receipt and Permit number 22256

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Harmond Street 43-47  
 OWNER'S NAME: Portland Peninsula Family ADDRESS: 155 Brackett Street

	FEES
<b>OUTLETS:</b>	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>130</u> .....	12.00
<b>FIXTURES: (number of)</b>	
Incandescent _____ Flourescent _____ (not strip) TOTAL <u>30</u> .....	5.00
Strip Flourescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead _____ Underground <u>X</u> Temporary _____ TOTAL amperes <u>400</u> ..	3.00
<b>METERS: (number of)</b> <u>5</u> .....	6.00
<b>MOTORS: (number of)</b>	2.50
Fractional _____	
1 HP or over _____	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
<b>APPLIANCES: (number of)</b>	
Ranges _____ <u>4</u> _____ Water Heaters _____ <u>4</u> _____	
Cook Tops _____ Disposals _____ <u>4</u> _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>12</u> .....	18.00
<b>MISCELLANEOUS: (number of)</b>	
Branch Panels <u>4</u> .....	4.00
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery <u>4</u> .....	2.00
Emergency Generators _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... INSTALLATION FEE DUE: _____	
FOR REMOVAL OF A "STOP ORDER" (304-13.b) ..... DOUBLE FEE DUE: _____	
TOTAL AMOUNT DUE: _____	52.50

**INSPECTION:**  
 Will be ready on \_\_\_\_\_, 19\_\_ ; or Will Call \_\_\_\_\_ X  
**CONTRACTOR'S NAME:** Forrest Elec  
**ADDRESS:** 721 Holm Avenue  
**TEL.:** 772-5257  
**MASTER LICENSE NO.:** 63512 **SIGNATURE OF CONTRACTOR:** \_\_\_\_\_  
**LIMITED LICENSE NO.:** \_\_\_\_\_

ELECTRICAL INSTALLATIONS —

Permit Number 22256

Location 43-170 Hammond St

Owner Postland Penmanship

Date of Permit 8/25/87

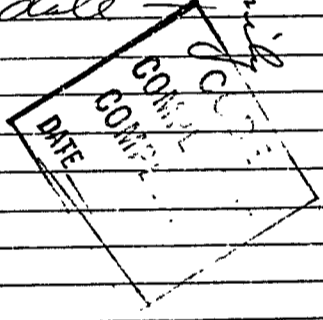
Final Inspection 8/25/87

By Inspector D. P. [unclear]

Permit Application Register Page No. 8

INSPECTIONS: Service 400 Amp Appo - 6/4/88  
100 Amp by Rune (Temp)  
 Service called in 1/15/87  
 Closing-in 2/8/88 by Rune  
 PROGRESS INSPECTIONS: 2/15/88, Cancelled  
8/5/88, M.O.H.

DATE:	REMARKS:
<u>10/14/87</u>	<u>Called CMP for Temporary Service</u>
<u>2/8/88</u>	<u>work may be closed in</u>
<u>8/5/88</u>	<u>Copy of [unclear] signed this date</u>





**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date August 25, 19 87  
 Receipt and Permit number 22256

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Hammond Street 43-47  
 OWNER'S NAME: Portland Peninsula Family ADDRESS: 155 Brackett Street

	FEES
<b>OUTLETS:</b>	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>130</u> .....	12.00
<b>FIXTURES:</b> (number of)	
Incandescent _____ Flourescent _____ (not strip) TOTAL <u>30</u> .....	5.00
Strip Flourescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead _____ Underground <u>X</u> Temporary _____ TOTAL amperes <u>100</u> ..	3.00
METERS: (number of) <u>5</u> .....	6.00
MOTORS: (number of)	2.50
Fractional _____	
1 HP or over _____	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
<b>APPLIANCES:</b> (number of)	
Ranges _____ <u>4</u> _____ Water Heaters _____ <u>4</u> _____	
Cook Tops _____ Disposals _____ <u>4</u> _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>12</u> .....	18.00
<b>MISCELLANEOUS:</b> (number of)	
Branch Panels <u>4</u> .....	4.00
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery <u>4</u> .....	2.00
Emergency Generators _____	
INSTALLATION FEE DUE: _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ... DOUBLE FEE DUE: _____	
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	
TOTAL AMOUNT DUE: _____	52.50

**INSPECTION:**  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call X  
 CONTRACTOR'S NAME: Forrest Elec  
 ADDRESS: 121 Holm Avenue  
 TEL.: 772-5257  
 MASTER LICENSE NO.: 03512 SIGNATURE OF CONTRACTOR: Forrest M. Walker  
 LIMITED LICENSE NO.: \_\_\_\_\_

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY

ELECTRICAL INSTALLATIONS -

Permit Number 2 2256

Location 13. 470 Hammond St

Owner Castle of Demerits

Date of Permit 8/25/87

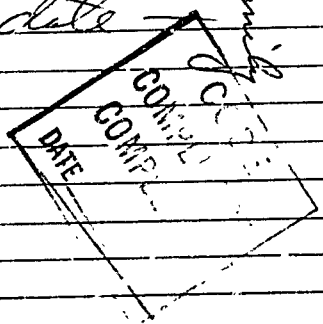
Final Inspection 8/25/87

By Inspector D. P. Reed

Permit Application Register Page No. 8

INSPECTIONS: Service 400 Amp Approved - 8/21/88  
 Service called in 100 Amp by Rune (Temp)  
 Service called in 11/5/87  
 Closing-in 2/8/88 by Rune  
 PROGRESS INSPECTIONS: 2/15/88, Cancelled  
8/5/88, M.O.H.

DATE:	REMARKS:
<u>11/14/87</u>	<u>Called CMP for Temporary Service</u>
<u>2/8/88</u>	<u>work may be closed in</u>
<u>8/5/88</u>	<u>Copy of O signed this date</u>





CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

## LOCATION

Issued to **PORTLAND WEST NEIGHBORHOOD 43-43 HAMMOND STREET** Issue **AUGUST 3, 1988**

This is to certify that the building, premises or part thereof, at the above location, built—altered—changed as to use under Building Permit No. \_\_\_\_\_, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

**ENTIRE**  
Limiting Conditions:

**4 FAMILY**

This certificate supersedes  
certificate issued

Approved:

8-3-88  
(Date)

*Arthur White*  
Inspector

*[Signature]*  
Inspector of Buildings

*DR*

Notice: This certificate identifies lawful use of building or premises, and must be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

PERMIT #	PORTLAND BUILDING PERMIT APPLICATION	DATE <u>1.3.127</u>	PERMIT ISSUED
I. GENERAL INFORMATION			SEP 10 1987
Location/address of construction <u>43-47 WATSON STREET</u>			City Of Portland
1. Owner's name	<u>Portland West Neigh. Planning Council</u>	tel. <u>775-0105</u>	
Address <u>115 Brockett St., Portland, ME</u>			
2. Lessee's name	Address _____ tel. _____		
3. Contractor's name <u>Lauka Construction Inc.</u>			
Address <u>Box 717, Yarmouth, ME 04096</u>			
4. Is this a legally recorded lot? yes <input checked="" type="checkbox"/> no <input type="checkbox"/>			

II. DESCRIPTION OF WORK: To construct 4-family house as per plans

and permit to call #3

III. BUILDING DIMENSIONS: length 30 width 50 square footage 4,000 height 28'1" #stories 2

IV. ZONE \_\_\_\_\_ Street frontage \_\_\_\_\_ Zoning board approval no  yes  date \_\_\_\_\_  
 Setback: front \_\_\_\_\_ back \_\_\_\_\_ side \_\_\_\_\_ side \_\_\_\_\_ Planning board approval no  yes  date \_\_\_\_\_

V. REVIEW REQUIRED: variance  other  Number of off-street parking spaces: \_\_\_\_\_  
 site plan \_\_\_\_\_ subdivision \_\_\_\_\_ shore \_\_\_\_\_ floodplain mgmt \_\_\_\_\_ enclosed \_\_\_\_\_ outdoors \_\_\_\_\_

VI. FEES: base fee 860.00 other fees \_\_\_\_\_  
 subdivision fee \_\_\_\_\_ late fee \_\_\_\_\_  
 site plan review fee \_\_\_\_\_ TOTAL \_\_\_\_\_

VII. DETAILS OF WORK

1. WATER SUPPLY: <input checked="" type="checkbox"/> public <input type="checkbox"/> private	7. ELECTRICAL: service entrance size <u>200 amp</u> # smoke detectors <u>9</u>	8. CHIMNEY: # flues _____ material _____ # fireplaces _____
2. SEWER: <input checked="" type="checkbox"/> public <input type="checkbox"/> private, type _____	9. FRAMING: floor joists <u>2x10-2x12</u> size _____ max. on center <u>24"</u> ceiling joists <u>crusins</u> rafters <u>crusins</u> studs <u>2x6 ext.</u> wall studs <u>1 1/2" 2x4</u>	
3. HEAT: type <u>hot water gas</u>	10. If 1-story building w/masonry walls: wall thickness _____ height _____	11. BEDROOM WINDOWS: height _____ width _____ sill height _____ egress window? yes <input type="checkbox"/> no <input type="checkbox"/>
4. FOUNDATION: type <u>concrete</u> thickness <u>8</u> footing <u>8x16</u>		
5. ROOF: type _____ pitch _____ covering <u>asphalt</u> load _____		
6. PLUMBING: SPRINKLER SYSTEM? yes <input type="checkbox"/> no <input type="checkbox"/>		

VIII. OFFICE USE: TAX MAP \_\_\_\_\_ PLOT # \_\_\_\_\_ VALUE/STRUCTURE \_\_\_\_\_ PERMIT EXPIRATION \_\_\_\_\_  
 CODE \_\_\_\_\_ (Other explain \_\_\_\_\_) PROPOSED USE 4-Family Special Condominium Apartment  
 XI. PART USE \_\_\_\_\_ XII. OWNERSHIP: PUBLIC PRIVATE  
 XIII. EST. CONSTRUCTION COST 115,000 XIV. GR. SQ. FT. OF LOT \_\_\_\_\_  
 BUILDING \_\_\_\_\_

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY: 1 BDRM. 2 BDRMS. 3 BDRMS.	XVI. RESIDENTIAL UNITS: NEW DWELLINGS EXISTING DWELLINGS TOTAL RESIDENTIAL UNITS
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APPROVALS BY: BUILDING INSPECTION \_\_\_\_\_ DATE \_\_\_\_\_  
 ZONING \_\_\_\_\_  
 FIRE DEPT. \_\_\_\_\_

MISCELLANEOUS: Will work require disturbing of any tree on a public street? \_\_\_\_\_  
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? \_\_\_\_\_

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical, and mechanicals.

District No. <u>7</u>	SIGNATURE OF APPLICANT _____	PHONE # <u>775-6436</u>
	TYPE NAME OF ABOVE _____	

White - G.P.C. Green - Applicant Yellow - Assessor Pink - Office File Gold - Field Inspector





APPLICATION FOR PERMIT

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....

ZONING LOCATION ..... PORTLAND, MAINE Oct. 7, 1986

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 43-47 Hammond St. Fire District #1  #2

1. Owner's name and address City of Portland, Me. Telephone .....

2. Lessee's name and address <sup>FUTURE OWNER</sup> Portland West Neighborhood Planning Council Telephone 775-0105

3. Contractor's name and address 155 Brackett St. Telephone .....

Proposed use of building 4 FAMILY No. of sheets .....

Last use No. families .....

Material No. stories Hital Style of roof Roofing .....

Other buildings on same lot .....

Estimated contractual cost \$ .....

FIELD INSPECTOR—Mr. Appeal Fees \$ 50.00

@ 775-5451 site plan Base Fee

Late Fee

site plan ~~review~~ review TOTAL \$

To construct 1 building 4,352 sq ft to be used

for 4 family for low income residential

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? For a notice sent?

Height average grade to top of plate Height average grade to highest point roof

Size, front depth No. stories solid or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise per foot Roof covering

No. of chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor 2nd 3rd roof

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 2nd 3rd roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street?

ZONING: Will there be in charge of the above work a person competent

BUILDING CODE: to see that the State and City requirements pertaining thereto

Fire Dept.: are observed?

Health Dept.: Others:

Signature of Applicant Michael R. Charek Phone # same

Type Name of above Michael R. Charek for 1  2  3  4

Portland West NEHD Planning Council Other

and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**

Town or Parish: Portland, Maine  
 Street: 42-77 Raymond  
 Subdivision Lot: Home and St

**PROPERTY OWNERS NAME**

Last: Portland West Neighborhood Library  
 First: Council

Applicant Name: 155 Brackett St  
 Mailing Address of Owner/Applicant (if different): Portland Me

PORTLAND PERMIT # 2,493 TOWN COPY

Fee: 192.80 \$ 9 FEE charged

Amelia Woodworth L.P.I. # \_\_\_\_\_  
 Local Plumbing Inspector Signature

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and I understand that any falsification is a reason for the Local Plumbing Inspector to deny a Permit.

Raymond Kelly Date: 6/12/88  
 Signature of Owner/Applicant

**Caution: Inspection Required**

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

June 14 1988 Date Approved  
 Local Plumbing Inspector Signature

**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.  MULTIFAMILY 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 # 193011

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.		Hosebibb / Silcock		Bathtub (end Shower)
		Floor Drain		Shower (Separate)
<b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Number of Hook-Ups & Relocations		Bidet		Laundry Tub
Hook-Up & Relocation Fee		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee
				Permit Total

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE