PLUI	MBING APPLICATION	ĎΝ		Department of Human Services Division of Health Engineering		
	PROPERTY ADDRESS				(207) 289-3826	
Town Or Plantation Island Ave. Cliff 109A-B-4						
Street Subdivision Lot #			Ation-Dormit Required			
PF	ROPERTY OWNERS NAME		PORTLAND Date		4630 TOWN COPY	
ast: Davis	First: Incenh		Permit Issued:	19 A	\$ 1/2 TEE Double	
Applicant	First: Joseph		Local Plumbing Inspecto	ALVEDON	L.P.I. #	
Name: Mailing Address of	Same		Chief Churchian	a digitalure		
Owner/Applicant (If Different) P.O. Box 94, Cliff 04019						
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 to denty a Permit. Signature of Owner/Applicant Date			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 Caution: Inspection Required Above and found it to be in Fig. 1-/9. Date Approved			
		PERM	TINFORMATION			
This Application is for Type Of Structure				Plum	bing To Be Installed By:	
1. ☑ NEW PLUMBING 1. □ SINGLE FAMILY DWELL			LING	1. □ MASTER PLUMBER 2. □ OIL BURNERMAN		
2. RELOCATED 2. MODULAR OR MOBILE INC.			A34.7			
PLUMBING 3. MULTIPLE FAMILY DWELLING				3. MFG'D. HOUSING DEALER/MECHANI		
4. □ OTHER - SPECIFY Su			Timer Hone	4. □ PUBLIC UTILITY EMPLOYEE 5. □ PROPERTY OWNER LICENSE # LILILIA		
Hook-l	Up & Piping Relocation		0-1	LICENSE #	F	
Max	imum of 1 Hook-Up	Number	Column 2 Type of Fixture	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	1	Bathtub (and Shower)	
		Floor Drain		1	Shower (Separate)	
			Jrinal \	1 3	Sink	
		С	rinking Fountain	_	Wash Basin	
		Indirect Waste		1 %	Water Closet (Toilet)	
		V	Vater Treatment Softener, Filter, etc.	1	Clothes Washer	
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		G	irease/Oil Separator		Dish Washer	
		D	ental Cuspidor	1	Garbage Disposal	
			idet		Laundry Tub	
Number of Hook-Ups & Relocations		0	ther:		Water Heater	
Hook-	-Up & Relocation Fee		Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1	
					Fixtures (Subtotal) Column 2	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE					Total Fixtures	
				\$ 12 ·	Fixture Fee	
				\$.	Hook-Up & Relocation Fee	
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