

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

Town or Plantation: Portland  
 Street Subdivision Lot #: 139 Craize St.  
 Last: Morrisso First: Vincent  
 Applicant Name: Pine State P+H Inc.  
 Mailing Address of Owner/Applicant (if Different): POB 6308 Scarborough, Me 04070

0002 8378

PORTLAND State Permit Issued: 11 22 02 PERMIT # 8273 STATE COPY \$ 1131.0101010  # Double Fee Charged  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 016411

**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: 11/17/02

**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: \_\_\_\_\_

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 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 _____	<b>Plumbing To Be Installed By:</b> 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>25011</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture	
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	0.3	Hosebibb / Sillcock	0.2	Bathtub (and Shower)	
		Floor Drain	0.2	Shower (Separate)	
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]	0.1	Urinal	0.1	Sink	
		Drinking Fountain	0.5	Wash Basin	
		Indirect Waste	0.4	Water Closet (Toilet)	
		Water Treatment Softener, Filter, etc.	0.2	Clothes Washer	
		Grease / Oil Separator	0.1	Dish Washer	
		Dental Cuspidor	0.1	Garbage Disposal	
		Bidet	0.2	Laundry Tub	
		Other: _____		Water Heater	
		Fixtures (Subtotal) Column 2		1.8	
				0.4	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			2.2	<b>Total Fixtures</b>	
				<b>Fixture Fee</b>	
				<b>Transfer Fee</b>	
				<b>Hook-Up &amp; Piping Relocation Fee</b>	
			138	<b>Permit Fee (Total)</b>	

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133  
10  
140