

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation: Portland
 Street Subdivision Lot #: 147 Clinton St.

PROPERTY OWNERS NAME

Last: _____ First: _____
 Applicant Name: Frank Watson
 Mailing Address of Owner/Applicant (If Different): _____

2004 049

Date Permit Issued: 10/17/04 PERMIT # 8774 STATE COPY If Double Fee Charged
 Local Plumbing Inspector Signature: [Signature] \$ 410.00 FEE
 L.P.I. # 0726

135-005

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] Date: 7/17/02
 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.

Local Plumbing Inspector Signature: _____ Date Approved: _____

PERMIT INFORMATION

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 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 checked="" type="checkbox"/> PROPERTY OWNER LICENSE # _____
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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
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
OR		Urinal	2	Sink
		Drinking Fountain		Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	2	Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
OR		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<input type="checkbox"/> TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Total Fixtures
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				Permit Fee
				Double Fee
				Hook-Up Fee
				Total Fee
				Permit Fee (Total)

42
 10
 3 = 42