

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation: PORTLAND
 Street Subdivision Lot #: 27 WAVERLY ST #2

PROPERTY OWNERS NAME

Last: DYE First: JASON
 Applicant Name: ALAN CYR
 Mailing Address of Owner/Applicant (if Different): 410 BROOK ST WESTBROOK

2004-8072

Date Permit Issued: 3/1/04 \$ 1,240.00 If Double Fee Charged
 Local Plumbing Inspector Signature: Jeanie Benke L.P.I. # 07312
146 A 011

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.

Alan Cyr
 Signature of Owner/Applicant

3-1-04
 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

Date Approved

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>09081</u></p>
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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. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock	1	Bathtub (and Shower)	
		Floor Drain		Shower (Separate)	
<input type="checkbox"/> PIPING RELOCATION: 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	
		Bidet		Laundry Tub	
		Other: _____		Water Heater	
		Fixtures (Subtotal) Column 2			
<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p> <p style="font-size: 24px; font-weight: bold;">24 10 34</p>				<p>Fixtures (Subtotal) Column 2</p> <p>Total Fixtures</p> <p>Hydro Fee</p> <p>Permit Fee (Total)</p>	
				2400	