

PLUMBING APPLICATION

11151

n & Human Services
 ntal Health, 11 SHS
 Fax: (207) 287-4172

PROPERTY ADDRESS

City, Town, or Plantation: Portland
 Street or Road: 138 ~~172~~ Canco Rd
 Subdivision, Lot #: Portland Service Center

Name (last, first, MI): Ranor Inc Owner Applicant
 Mailing Address of Owner/Applicant: PO Box 5036 North Jay ME 04962
 Daytime Tel. #: 207-645-5109

APPROVAL REQUIRED <<

Town/City: Portland Permit #: 201265548
 Date Permit Issued: 12/6/12 Fee: \$ 50 Double Fee Charged []
 Local Plumbing Inspector Signature: [Signature] L.P.I. #: _____

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

CAUTION: INSPECTION REQUIRED

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

OWNER OR APPLICANT STATEMENT
 I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant: [Signature] Date: 11/20/12

Local Plumbing Inspector Signature: _____ Date Approved (Rough-In): _____
 Date Approved (Final): _____

PERMIT INFORMATION

This Application Is For

- NEW PLUMBING INSTALLATION
- RELOCATED PLUMBING

Type of Structure To Be Served

- SINGLE-FAMILY DWELLING
- MULTIFAMILY OR MOBILE HOME
- COMMERCIAL BUILDING
- OTHER-SPECIFY Other Bldg

Plumbing To Be Installed By

- MASTER PLUMBER
- MFG'D HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

RECEIVED DEC 05 2012
 Dept. of Building Inspections
 City of Portland
 License # 14273

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		Hosebibb / Silcock		Bathtub (and Shower)
OR		Floor Drain		Shower (Separate)
<input type="checkbox"/> HOOK UP: to an existing subsurface wastewater disposal system		Urinal	1	Sink
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures		Drinking Fountain	1	Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.		Clothes Washer
	1	Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
OR		Other: _____		Water Heater
<input type="checkbox"/> TRANSFER FEE (\$10.00)		Fixtures (Subtotal) Column 2	02	Fixtures (Subtotal) Column 1
			01	Fixtures (Subtotal) Column 2
			03	Total Fixtures
			10.00	Fixture Fee <i>Surcharge</i>
			10.00	Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee
			\$40.00	(Total)