

12/26/01 - Rough In Framing & Plumbing
3rd only - ok (Bedroom windows
Sect. 3400)

1/11/02 1st fl. - Separate GFI added in Ki -
Tempered Glass added in Bathroom
RIR Bedroom Smoke moved to proper height
1st ok to occupy K

2/27/02 final - Need permits for 2 furnace (oil)
and 2 Rinnai Gas Heaters JB

3/1/02 - permits Applied for - 2 Oil Burners & 2 Rinnai Gas
monitors. Sent letter of completion. JB

168-C-5
010974

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	200 Washington Ave.
Last: <u>Post</u>	First: <u>Brodford</u>
Applicant Name:	GARY TURNER
Mailing Address of Owner/Applicant (If Different)	467 Greeley Road Ext. Cumberland Ctr. Me. 04021

PORTLAND Date Permit Issued: <u>8/13/01</u>	7800 TOWN COPY \$ <u>6161010</u> <input type="checkbox"/> # Double Fee Charged
Local Plumbing Inspector Signature	L.P.I. # <u>01124</u>

165 6 005

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] 8/3/01
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.

[Signature] 2/21/02
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 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>12491</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	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.	1	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	2	Sink
		Drinking Fountain	2	Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	1	Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	10	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			1	Fixtures (Subtotal) Column 2
			11	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			66	Permit Fee (Total)