PLUMBING APPLICATI	179-6-	016	Department of Human Services Division of Health Engineering		
PROPERTY ADDRESS Town Or Plantation POStano Street Subdivision Lot # Best 3+ # 24 PROPERTY OWNERS NAME Last: Applicant Name: First: Applicant Name: Faic Mailing Address of Owner/Applicant (If Different) 18 Leohard St Postano 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 information generation of the post of the best of my knowledge and understand that any falsification is reason for the Local information generation of the post of the best of my knowledge and understand that any falsification is reason for the Local information generation of the post of the best of the b		PORTLAND PORTLAND Porter Permit Bate Permit Permit 6358 Issued: Image: Pression of the state of the s			
	THE OPPONT				
This Application is for Ty	e To Be Served:	Plum	bing To Be Installed By:		
2.	 1. E SINGLE FAMILY DWELLING 2. □ MODULAR OR MOBILE HOME 3. □ MULTIPLE FAMILY DWELLING 4. □ OTHER — SPECIFY			1. Æ MASTER PLUMBER 2. □ OIL BURNERMAN 3. □ MFG'D. HOUSING DEALER / MECHANIC 4. □ PUBLIC UTILITY EMPLOYEE 5. □ PROPERTY OWNER LICENSE # 8. 8.7.8.	
Hook-Up & Piping Relocation		Column 2		Column 1	
those cases where the connection		Type of Fixture osebibb / Sillcock oor Drain		Type of Fixture Bathtub (and Shower) Shower (Separate)	
OR		inal	6, 1	Sink	
		inking Fountain		Wash Basin	
	Indirect Waste		0,1	Water Closet (Toilet)	
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Water Treatment Softener, Filter, etc.		\circ	Clothes Washer	
	Gr	ease / Oil Separator	CI	Dish Washer	
	De	ental Cuspidor		Garbage Disposal	
OR		det	- 1	Laundry Tub	
	Other:		_	Water Heater	
[\$6.00]		Fixtures (Subtotal) Column 2	0,4	Fixtures (Subtotal) Column 1	
Page 1 of 1 HHE-211 Rev. 6/94			s s s s/c	Firturra (Subtotal) Folumi 2 Total Fixtures Fixture For Fixture For Ficology & Relocation Foe Permit Fee (Total)	

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