

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation: Portland  
Street Subdivision Lot #: 50 Sewell St.

## PROPERTY OWNERS NAME

Last: Dermatology First: Pine State Services  
Applicant Name: Pine State Services  
Mailing Address of Owner/Applicant (If Different): PO Box 6308  
Scor ME. 04074-6308

## Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understanding and that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

*Lee Holly*  
Signature of Owner/Applicant

6-11-09  
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

189-A 31

PORTLAND PERMIT # 10973 STATE COPY

Date Permit Issued: 6/11/09 \$ 1129  If Double Fee Charged

L.P.I. # 1081

Local Plumbing Inspector Signature

2007-8103

## PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input 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 <u>medical building Drs. office</u>	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 type="checkbox"/> PROPERTY OWNER LICENSE # <u>MS 8235</u>

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.  <b>OR</b>  HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b>  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	<u>02</u>	Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
<b>OR</b>  TRANSFER FEE [\$6.00]		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE