

209A 0016 002

PLUMBING APPLICATION

#12070

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

PROPERTY ADDRESS

City, Town, or Plantation: Portland
 Street or Road: 145 Jus Post Rd
 Subdivision, Lot #: Hilton Garden
PROPERTY OWNERS NAME
 Name (last, first, MI): Ranor Mechanical 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 # 2013 02015
 Date Permit Issued: 9/9/13 Fee: \$ 50 Double Fee Charged []
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

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.
Ranor Mechanical 8/30/13
 Signature of Owner or Applicant Date

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

PERMIT INFORMATION

This Application Is For 1. <input type="checkbox"/> NEW PLUMBING INSTALLATION 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 type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Hotel</u>	Plumbing To Be Installed By 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC 3. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 4. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>14273</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2	Column 1
	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		Hosebibb / Silcock
		Bathtub (and Shower)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures		Floor Drain
		Shower (Separate)
OR TRANSFER FEE (\$10.00)	0.2	Urinal
		Sink
		Drinking Fountain
		Wash Basin
		Indirect Waste
		Water Closet (Toilet)
		Waste 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
		Fixtures (Subtotal) Column 1
	02	Fixtures (Subtotal) Column 2
	02	Total Fixtures
	10.00	Fixture Fee
	10.00	Transfer Fee
	50.00	Hook-Up & Relocation Fee
		Permit Fee
		(Total)