

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: PORTLAND
Street / Subdivision Lot #: 1050 WESTBROOK AVE

PROPERTY OWNERS NAME

Last: EMBASSY SUITES
WR PORTLAND HOTEL VENTURE LLC

Applicant Name: PINE STATE PEH
Mailing Address of Owner/Applicant (if Different): PO BOX 6308
SCARBOROUGH ME 04070

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.

Terence L. Davis 4-15-08
Signature of Owner/Applicant Date

2008-8103

PORTLAND PERMIT # 10601 TOWN COPY

Date Permit Issued: 4/17/08 \$ 1100 Double Fee Charged

[Signature] L.P.I. # 360

210 AAS

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

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>HOTEL</u></p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>6993</u></p>
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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. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
	<u>0, 2</u>	Floor Drain	<u>0, 2</u>	Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	<u>0, 10</u>	Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	<u>0, 10</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	<u>0, 2</u>	Fixtures (Subtotal) Column 2	<u>1, 4</u>	Fixtures (Subtotal) Column 1
			<u>0, 2</u>	Fixtures (Subtotal) Column 2
			<u>1, 6</u>	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			<u>102</u>	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

016919

102
10
112