

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland Me.
Street Subdivision Lot #: Starbuck Ln Unit #9

PROPERTY OWNERS NAME

Last: Brown First: TERRY
Applicant Name: Robert S. Doric
Mailing Address of Owner/Applicant (If Different): 294 Holmes Rd. Scarborough 04074

04 8439

PORTLAND Date Permit Issued: 10/19/09 \$ 1186 TOWN COPY If Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 016180
224 A 25 # 040398

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.

Robert S. Doric 10-13-09
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.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input checked="" 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 type="checkbox"/> OTHER - SPECIFY _____</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>08566</u></p>
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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
<p>OR</p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>OR</p> <p>TRANSFER FEE [\$6.00]</p>	<u>2</u>	Hosebibb / Sillcock	<u>1</u>	Bathtub (and Shower)
		Floor Drain	<u>1</u>	Shower (Separate)
		Urinal	<u>1</u>	Sink
		Drinking Fountain	<u>4</u>	Wash Basin
		Indirect Waste	<u>3</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	<u>1</u>	Clothes Washer
		Grease / Oil Separator	<u>1</u>	Dish Washer
		Dental Cuspidor	<u>1</u>	Garbage Disposal
		Bidet	<u>1</u>	Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>2</u>	Fixtures (Subtotal) Column 1
			<u>13</u>	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			<u>96</u>	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

96
+ 10/6
106