## Department of Human Sciences PLUMBING APPLICATION Division of Health Engineering PROPERTY ADDRESS Town or GUANTSHO Plantation Street PARTRIDGE Subdivision Lot # PORTLAND 2 PROPERTY OWNERS NAME Applicant Auc BEEN Name: Mailing Address of Owner/Applicant SO FREEWORT ME 01078 (If Different) Caution: Inspection Required **Owner/Applicant Statement** I certify that the information submitted is correct to the best of my I have inspected the installation authorized above and found it to be in knowledge and understand that any falsification is reason for the Local compliance with the Maine Plumbing Rules. Plumbing Inspectors to deny a Permit. Tour de Local Plumbing Inspector Signature Signature of Owner/Applicant Date Approved PERMIT INFORMATION This Application is for Type of Structure To Be Served: Plumbing To Be Installed By: 1. NEW PLUMBING 1. X SINGLE FAMILY DWELLING 1. MASTER PLUMBER 2. OIL BURNERMAN 2. MODULAR OR MOBILE HOME 2. M RELOCATED PLUMBING 3. MFG'D. HOUSING DEALER/MECHANIC 3. MULTIPLE FAMILY DWELLING 4. PUBLIC UTILITY EMPLOYEE 4. OTHER - SPECIFY 5. PROPERTY OWNER LICENSE # COLLYGO Hook-Up & Piping Relocation Column 2 Column 1 Maximum of 1 Hook-Up Number Type of Fixture Number Type of Fixture Hosebibb / Sillcock Bathtub (and Shower) HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by Floor Drain Shower (Separate) the local Sanitary District. Urinal Sink **Drinking Fountain** Wash Basin HOOK-UP: to an existing subsurface wastewater disposal system. Indirect Waste Water Closet (Toilet) PIPING RELOCATION: of sanitary lines, drains, and piping without Water Treatment Softener, Filter, etc. Clothes Washer new fixtures. Grease / Oil Separator Dish Washer **Dental Cuspidor** Garbage Disposal OR Bidet Laundry Tub Other: Water Heater TRANSFER FEE Fixtures (Subtotal) Fixtures (Subtotal) [\$6.00] Column 1 Column 2 Fixtures (Subtotal) Column 2 SEE PERMIT FEE SCHEDULE **Total Fixtures** FOR CALCULATING FEE

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Permit Fee (Total)

Fixture Fee
Transfer Fee
Hook-Up & Relocation Fee