

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	Potlana
Street Subdivision Lot #	13 Blueberry Rd
<b>PROPERTY OWNERS NAME</b>	

**Caution: Permit Required**

Plumbing shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing in accordance with this application and the Maine Plumbing Rules.

Last: Veterinary Spc First: Potlana

Applicant Name: John Bellino

Mailing Address of Owner/Applicant (If Different): 980 Riverside St. Potlana ME 04103

## 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.

*[Signature]* 8/1/00  
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.

*[Signature]* 8/January/2K  
Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

<p><b>This Application is for</b></p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></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>Veterinary clinic</u></p>	<p><b>Plumbing To Be Installed By:</b></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>02415</u></p>
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### Hook-Up & Piping Relocation Maximum of 1 Hook-Up

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.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

**OR**

TRANSFER FEE  
[\$6.00]

Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
1	Hosebibb / Sillcock		Bathtub (and Shower)
3	Floor Drain		Shower (Separate)
	Urinal	8	Sink
	Drinking Fountain	1	Wash Basin
	Indirect Waste	1	Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	1	Clothes Washer
	Grease / Oil Separator		Dish Washer
	Dental Cuspidor		Garbage Disposal
	Bidet		Laundry Tub
1	Other: <u>2yr wash</u>	1	Water Heater
	Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
		15	Fixtures (Subtotal) Column 2
		27	<b>Total Fixtures</b>
		162	Fixture Fee
			Transfer Fee
			Hook-Up & Relocation Fee
		162	<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE  
FOR CALCULATING FEE