

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

200 2 807

PROPERTY ADDRESS

Town Or Plantation: **PORTLAND**
Street Subdivision Lot #: **NEW Turnpike Interchange**

PROPERTY OWNERS NAME

Last: **MAINE Turnpike Authority**
First:

Applicant Name: **RIVERSIDE MECHANICAL INC
DONALD NEUTS**

Mailing Address of Owner/Applicant (If Different): **125 Presumpscot St
PORTLAND 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 Inspector to deny a Permit.

[Signature]
Signature of Owner/Applicant

12/27/02
Date

PORTLAND PERMIT # 7954 STATE COPY
Date Permit Issued: **1 14 02** \$ **412014** If Double Fee Charged
L.P.I. # **01513**
Local Plumbing Inspector Signature: _____
251 A 005

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

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input 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>Turnpike Building</u>	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>82611</u>
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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
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.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		1 Other <u>MOP Receptor</u>		1 Water Heater
Number of Hook-Ups & Relocations		2	4	Fixtures (Subtotal) Column 1
\$ Hook-Up & Relocation Fee			2	Fixtures (Subtotal) Column 2
OR TRANSFER FEE [\$6.00]			6	Total Fixtures
			\$	Fixture Fee
			\$	Transfer Fee
			\$	Hook-Up & Relocation Fee
			\$ 42	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

STATE COPY

42
14
52
52

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 Division of Health Engineering
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PROPERTY ADDRESS

Town Or Plantation

PORTLAND

Street Subdivision Lot #

NEW Turnpike Interchange

PROPERTY OWNERS NAME

MAINE Turnpike Authority

Last:

First:

Applicant Name:

RIVERS OF MECHANICAL INC
 DONALD NEUTS

Mailing Address of Owner/Applicant (if Different)

125 BRESUMPS CO ST
 PORTLAND ME 04103

Owner/Applicant Statement

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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

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type Of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER — SPECIFY Turnpike Building

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
 - 2. OIL BURNERMAN
 - 3. MFG'D. HOUSING DEALER / MECHANIC
 - 4. PUBLIC UTILITY EMPLOYEE
 - 5. PROPERTY OWNER
- LICENSE # 182617

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		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 new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
Number of Hook-Ups & Relocations		Dental Cuspidor		Garbage Disposal
\$ Hook-Up & Relocation Fee		Bidet		Laundry Tub
	OR	1	Other: <u>MOP Receptor</u>	1
TRANSFER FEE [\$6.00]		2	Fixtures (Subtotal) Column 2	14
			12	Fixtures (Subtotal) Column 2
			6	Total Fixtures
			\$	Fixture Fee
			\$	Transfer Fee
			\$	Hook-Up & Relocation Fee
			\$	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

42
 14
 52