

# PLUMBING APPLICATION

270-C-003

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

|   |                       |
|---|-----------------------|
| Town or Plantation                                | Portland              |
| Street Subdivision Lot #                          | Unit 15+16 Holm Place |
| Last:   | V.P. Builders         |
| Applicant Name:                                   | William Carr          |
| Mailing Address of Owner/Applicant (If Different) | 368 Gray Rd Fal.      |

2002-8102

PORTLAND Date Permit Issued: 10/31/02

PERMIT # 8016

STATE COPY \$ 1186.00  Double Fee Charged

231 Local Plumbing Inspector Signature: *[Signature]* L.P.I. # 0640

### 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.

*William H Carr* 3/11/02  
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><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>Duplex</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>01632</u></p> |
|--|---|---|

| Hook-Up & Piping Relocation<br>Maximum of 1 Hook-Up   | Column 2                     |  | Column 1 |                              |
|---|------------------------------|--|----------|------------------------------|
|   | Number                       | Type of Fixture                        | Number   | Type of Fixture              |
| <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center; font-size: 24px; font-weight: bold;">OR</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 style="text-align: center; font-size: 24px; font-weight: bold;">OR</p> <p>TRANSFER FEE<br/>[\$6.00]</p> | 4                            | Hosebibb / Sillcock                    | 2        | Bathtub (and Shower)         |
|   |                              | Floor Drain                            | 2        | Shower (Separate)            |
|   |                              | Urinal                                 | 2        | Sink                         |
|   |                              | Drinking Fountain                      | 6        | Wash Basin                   |
|   |                              | Indirect Waste                         | 6        | Water Closet (Toilet)        |
|   |                              | Water Treatment Softener, Filter, etc. | 2        | Clothes Washer               |
|   |                              | Grease / Oil Separator                 | 2        | Dish Washer                  |
|   |                              | Dental Cuspidor                        | 2        | Garbage Disposal             |
|   |                              | Bidet                                  |          | Laundry Tub                  |
|   |                              | Other: _____                           | 2        | Water Heater                 |
|   | Fixtures (Subtotal) Column 2 |  | 26       | Fixtures (Subtotal) Column 1 |
| SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE   |                              |  |          |                              |
|   | 4                            |  | 4        | Fixtures (Subtotal) Column 2 |
|   | 30                           |  | 30       | Total Fixtures               |
|   | 180                          |  | 180      | Fixture Fee                  |
|   | 10.00                        |  | 10.00    | Sanitary Transfer Fee        |
|   |                              |  |          | Hook-Up & Relocation Fee     |
|   |                              |  | 186      | Permit Fee (Total)           |