

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

| | |
|--------------------------|---------------|
| Town or Plantation | Portland ME. |
| Street Subdivision Lot # | 269 Helen Ave |

PROPERTY OWNERS NAME

Custom Built Homes of Maine
Last: _____ First: _____

Applicant Name: Tim Davis Plumbing & Heating Inc.

Mailing Address of Owner/Applicant (If Different): P.O. Box 955, Lyman ME. 04002

PORTLAND PERMIT # 9952 TOWN COPY

Date Permit Issued: 7/24/06 \$ 1721.09 If Double Fee Charged

Local Plumbing Inspector Signature: Thomas Markley L.P.I. # 07706

272 F 004

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 of Owner/Applicant: *Tim Davis* Date: 7/24/06

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 checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____ | 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 # 07706 |
|---|--|---|

| 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. | 2 | Hosebibb / Sillcock | 1 | Bathtub (and Shower) |
| | | Floor Drain | | Shower (Separate) |
| OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Urinal | 1 | Sink |
| | | Drinking Fountain | 2 | Wash Basin |
| | | Indirect Waste | 2 | Water Closet (Toilet) |
| | | Water Treatment Softener, Filter, etc. | 1 | Clothes Washer |
| | | Grease / Oil Separator | 1 | Dish Washer |
| | | Roof Drain | | Garbage Disposal |
| | | Bidet | | Laundry Tub |
| | | Other: _____ | 1 | Water Heater |
| OR TRANSFER FEE [\$6.00] | | Fixtures (Subtotal) Column 2 | 9 | Fixtures (Subtotal) Column 1 |
| | | | 2 | Fixtures (Subtotal) Column 2 |
| SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE | | | 11 | Total Fixtures |
| | | | | Fixture Fee |
| | | | | Transfer Fee |
| | | | | Hook-Up & Relocation Fee |
| | | | 82 | Permit Fee (Total) |

#2956