

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

284-D-024

#3
AR

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 76 Kent St

PROPERTY OWNERS NAME

Last: Murray First: Scott

Applicant Name: Unlimited Mechanical

Mailing Address of Owner/Applicant (If Different): 4 Ledgewood St. Sanford

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: M. Murray Date: 9-28-01

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

PORTLAND 7861 TOWN COPY
Date Permit Issued: 9 28 01 \$ 3000 If Double Fee Charged
Local Plumbing Inspector Signature: _____ L.P.I. # 0124

PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	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 _____	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>07405</u>

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 / Silcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal		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
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
			1	Fixtures (Subtotal) Column 2
			5	Total Fixtures
			6.00	Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			30.00	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

30
10
40