

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	Lot 21 Massie Ln

## PROPERTY OWNERS NAME

Last:	Chase	First:	John
Applicant Name:	James Cedaro		
Mailing Address of Owner/Applicant (If Different)	28 Tenney Ln South		

PORTLAND 7949 TOWN COPY

Date Permit Issued: 11/7/01 \$ 1126.00  Double Fee Charged

L.P.I. # 01593

Local Plumbing Inspector Signature \_\_\_\_\_

292 A 04/12

## 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.

## Caution: Inspection Required

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

Signature of Owner/Applicant \_\_\_\_\_ Date \_\_\_\_\_

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved 4/9/02

## 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 checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</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 # 12637</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <p style="text-align: center; font-size: 2em;"><b>OR</b></p> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	2	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	2	Sink
		Drinking Fountain	4	Wash Basin
		Indirect Waste	4	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: _____		Water Heater
		Fixtures (Subtotal) Column 2	18	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
		20	<b>Total Fixtures</b>	
			Fixture Fee	
			Transfer Fee	
			Hook-Up & Relocation Fee	
			<b>Permit Fee (Total)</b>	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

126  
10  
136