

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering

2002-8139

## PROPERTY ADDRESS

Town Or Plantation: Portland  
Street Subdivision Lot #: 80 Warren Ave

## PROPERTY OWNERS NAME

Last: Maaco auto First:

Applicant Name:

Mailing Address of Owner/Applicant (If Different): 80 Warren Ave

PORTLAND Date Permit Issued: 4-10-02 PERMIT # 8049 STATE COPY \$ 24.00  If Double Fee Charged  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 0640  
293 A 015

## 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.

## 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: [Signature] Date: 4-17-02

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type Of Structure To Be Served:</b> 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>Commercial</u>	<b>Plumbing To Be Installed By:</b> 1. <input 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>116411</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.  <b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	0, 1	Wash Basin
<b>OR</b> TRANSFER FEE [\$6.00]		Indirect Waste	0, 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
		<b>Fixtures (Subtotal) Column 2</b>	0, 2	<b>Fixtures (Subtotal) Column 1</b>
				<b>Fixtures (Subtotal) Column 2</b>
			0, 2	<b>Total Fixtures</b>
			\$	<b>Fixture Fee</b>
			\$	<b>Transfer Fee</b>
			\$	<b>Hook-Up &amp; Relocation Fee</b>
			\$ 24.	<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

24  
15  
24