

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering

4. A. Powers

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street Subdivision Lot #	10 Bishop ST.
PROPERTY OWNERS NAME	

Last:	Boyle	First:	William
Applicant Name:		Pine State P&H Inc.	
Mailing Address of Owner/Applicant (If Different)		P.O. Box 6308 SCARBOROUGH, ME.	

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.

Signature of Owner/Applicant

Date

8-22-97

DATE Permit Issued:	8-22-97	PERMIT #	6242	STATE COPY	<input type="checkbox"/> If Double Fee Charged
L.P.I. #			0124		

Local Plumbing Inspector Signature

8-25-97 Underground

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	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 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 Bldg.</u>	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>02501</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP: to an existing subsurface wastewater disposal system.	0	Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	0	Wash Basin
		Indirect Waste	0	Water Closet (Toilet)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	0	Laundry Tub
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]	0	Fixtures (Subtotal) Column 2	0	Fixtures (Subtotal) Column 1
	1		3	
		0	1	Fixtures (Subtotal) Column 2
		0	4	Total Fixtures
		\$		Fixture Fee
		\$		Transfer Fee
		\$		Hook-Up & Relocation Fee
		\$	16	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE