

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

Town or Plantation: PORTLAND

Street Subdivision Lot #: 15 HOMEWOOD PR.

Last: DOW First: MARY ELLEN

Applicant Name: SHELDON GOLDMAN

Mailing Address of Owner/Applicant (If Different): 31 PEARLY TERRACE  
50- PORTLAND 04106

PORTLAND Date Permit Issued: 09/09/03 PERMIT # 8606 STATE COPY \$ 124100  Double Fee Charged

Jon Kool L.P.I. # 02336

236 Local Plumbing Inspector Signature

### 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.

Sheldon Goldman 09/05/03  
Signature of Owner/Applicant Date

### Caution: Inspection Required

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

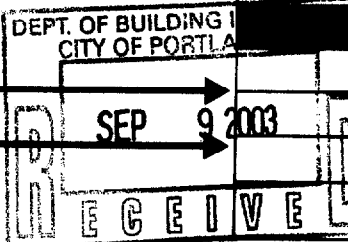
Local Plumbing Inspector Signature

Date Approved

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input 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>CONDO</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>23163</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.  <b>OR</b>  HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
<b>OR</b>  TRANSFER FEE (\$6.00)		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	<u>01</u>	Water Heater <u>REPLACEMENT</u>
		Fixtures (Subtotal) Column 2		

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



CK 4262