

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	PLD ME
Street	129 BELFORT
Subdivision Lot #	

## PROPERTY OWNERS NAME

Last:	MORIN	First:	PATRICK
Applicant Name:	HAROLD COTE JR.		
Mailing Address of Owner/Applicant (If Different)	129 BELFORT ST PLD ME		

PORTLAND PERMIT # 9559 TOWN COPY

Date Permit Issued: 7/20/05 \$ 1124  If Double Fee Charged

*Ben W. Canell*  
Local Plumbing Inspector Signature L.P.I. # 0603

300 B 54

## 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

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

## 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 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 _____	<b>Plumbing To Be Installed By:</b> 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 # M.S.C.O. 05045
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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 checked="" type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock	0, 1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	0, 1	Sink
		Drinking Fountain		Wash Basin
		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
		Fixtures (Subtotal) Column 2	0, 3	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			<b>Total Fixtures</b>	
			Fixture Fee	
			Transfer Fee	
			Hook-Up & Relocation Fee	
			<b>Permit Fee (Total)</b>	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

24  
+ 10  
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34

24