

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

Town or Plantation: PORTLAND  
 Street Subdivision Lot #: 585 RIVERSIDE BUILDING C  
 Last: BOYLE First: WILLIAM  
 Applicant Name: SCOTT NASW  
 Mailing Address of Owner/Applicant (If Different): PO BOX 3374 PORTLAND, ME. 04104

PORTLAND PERMIT # 9801 TOWN COPY  
 Date Permit Issued: 3/22/06 \$ 111.38  If Double Fee Charged  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 0641  
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**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: [Signature] Date: 3/22/06

**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: [Signature] Date Approved: 3/22/06

**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 CONDOS</u>	<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 # <u>81681</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. <b>OR</b> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <b>OR</b> TRANSFER FEE [\$6.00]		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	8	Wash Basin
		Indirect Waste	8	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	6	Water Heater
	Fixtures (Subtotal) Column 2	22		
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE $\begin{array}{r} 138 \\ 10 \\ \hline 148 \end{array}$			22	Total Fixtures
				Fixture Fee
				Permit Fee (Total)
			138	