Department of Human Sciences PLUMBING APPLICATION Division of Health Engineering Town or Plantation Street Subdivision Lot # TOWN COPY FFF First Last Applicant Name: G Mailing Address of Owner/Applicant 14 . ( ; (If Different) **Caution: Inspection Required 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 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules. Date Approved æ 10 Ser Date Local Plumbing Inspector Signature Signature of Owner/Applicant PERMIT INTORMATI Type of Structure To Be Served: This Application is for **Piumbing To Be installed By:** 1. PNEW PLUMBING 1. D-STNGLE FAMILY DWELLING 1. CHASTER PLUMBER 2. 
D MODULAR OR MOBILE HOME 2. 🗆 OIL BURNERMAN 3. 🗆 MFG'D. HOUSING DEALER/MECHANIC 3. D MULTIPLE FAMILY DWELLING 4. 
 PUBLIC UTILITY EMPLOYEE 4. 
OTHER – SPECIFY 5. 
PROPERTY OWNER LICENSE # 1.26.3.2 Column 2 Hook-Up & Piping Relocation Column 1 Maximum of 1 Hook-Up **Type of Fixture** Type of Fixture Number Number <u>HOOK-UP</u>: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. Hosebibb / Sillcock Bathtub (and Shower) Floor Drain Shower (Separate) Sink Urinal OR 4 -Wash Basin **Drinking Fountain** HOOK-UP: to an existing subsurface wastewater disposal system. Indirect Waste Water Closet (Toilet) PIPING RELOCATION: of sanitary lines, drains, and piping without Water Treatment Softener, Filter, etc. **Clothes Washer** new fixtures. Grease / Oil Separator **Dish Washer** Garbage Disposal **Dental Cuspidor** Bidet Laundry Tub OR Other: Water Heater TRANSFER FEE Fixtures (Subtotal) [\$6.00] Column 2 SEE PERMIT FEE SCHEDULE **Total Fixtures** FOR CALCULATING FEE 3 Permit Fee 3 Page 1 of 1  $\boldsymbol{\mathcal{O}}$ (Total) HHE-211 Rev. 6;94 TOWN COPY