

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation: PORTLAND  
Street Subdivision Lot #: 1816 FOREST AVE

## PROPERTY OWNERS NAME

WELLESLEY ESTATES BOX 7

Last: \_\_\_\_\_ First: \_\_\_\_\_

Applicant Name: GRANITE COOP KEVIN A PURDELL

Mailing Address of Owner/Applicant (If Different): 18 Hill St OAKLAND, ME 04963

2003-8137 360

PORTLAND	8436	TOWN COPY	
Date Permit Issued: <u>4/25/03</u>	\$ <u>21101010</u>	<input type="checkbox"/> If Double Fee Charged	
Local Plumbing Inspector Signature: <u>[Signature]</u>		L.P.I. # <u>3,601</u>	

307 2013E

## 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] 4/26/03  
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.

[Signature] 02/17/04  
Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

### This Application is for

1.  NEW PLUMBING
2.  RELOCATED PLUMBING

### Type of Structure To Be Served:

1.  SINGLE FAMILY DWELLING
2.  MODULAR OR MOBILE HOME
3.  MULTIPLE FAMILY DWELLING
4.  OTHER - SPECIFY \_\_\_\_\_

### Plumbing To Be Installed By:

1.  MASTER PLUMBER
2.  OIL BURNERMAN
3.  MFG'D. HOUSING DEALER/MECHANIC
4.  PUBLIC UTILITY EMPLOYEE
5.  PROPERTY OWNER

LICENSE # 18907

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input 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.	1	Hosebibb / Sillcock	4	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	4	Sink
		Drinking Fountain	6	Wash Basin
		Indirect Waste	6	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	4	Clothes Washer
		Grease / Oil Separator	4	Dish Washer
		Dental Cuspidor	4	Garbage Disposal
<b>OR</b> <input type="checkbox"/> TRANSFER FEE (\$6.00)		Bidet	1	Laundry Tub
		Other: _____	1	Water Heater
		Fixtures (Subtotal) Column 2	3,3	Fixtures (Subtotal) Column 1
			1	Fixtures (Subtotal) Column 2
			34	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

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