

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: PORTLAND, MAINE
Street Subdivision Lot #: 176 RIVERSIDE IND. PARK

PROPERTY OWNERS NAME

Last: INTERNATIONAL CAR PARTS First: _____

Applicant Name: AIRTEMP

Mailing Address of Owner/Applicant (If Different): 11 WALLACE AVE. S. PORTLAND, ME. 04106

330-H-003

PORTLAND PERMIT # 10656 TOWN COPY

Date Permit Issued: _____ \$ _____ If Double Fee Charged

Joanne Ranko L.P.I. # 07312
Local Plumbing Inspector Signature

2008-8160

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: 5/30/08

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

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" 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>DISTRIBUTION</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>056851</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 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 style="font-size: 24px; text-align: center;">OR HOOK-UP: to an existing subsurface wastewater disposal system.	1	Hosebibb / Sillcock	1	Bathtub (and Shower)
	1	Floor Drain	1	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <b style="font-size: 24px; text-align: center;">OR TRANSFER FEE [\$6.00]	1	Urinal	1	Sink
	1	Drinking Fountain	2	Wash Basin
	1	Indirect Waste	2	Water Closet (Toilet)
	1	Water Treatment Softener, Filter, etc.	1	Clothes Washer
	1	Grease / Oil Separator	1	Dish Washer
	1	Roof Drain	1	Garbage Disposal
	1	Bidet	1	Laundry Tub
	1	Other: _____	2	Water Heater
	6	Fixtures (Subtotal) Column 2	6	Fixtures (Subtotal) Column 1
	1		1	Fixtures (Subtotal) Column 2
	7		7	Total Fixtures
			6.00	1st 3 Fixture Fee
			10.00	Transfer Fee
			6.00	Hook-Up & Relocation Fee
			58.00	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$2.40 for 1st 3 fixtures
\$6.00 for 1st 3 fixture fee
\$10.00 surcharge

- 51937