

PLUMBING APPLICATION

333-K-010

Department of Human Services
Division of Health Engineering

PROPERTY ADDRESS

Town Or Plantation: Portland
Street Subdivision Lot #: 149 Berkeley L152

PROPERTY OWNERS NAME

Last: Custombait Homes of Maine First: _____
Applicant Name: Thomas Stranph
Mailing Address of Owner/Applicant (If Different): 191A Bacc St. Gorham, ME

PORTLAND Date Permit issued: 1, 9, 98 6342 \$ 48 TOWN COPY 01, 24 If Double Fee Charged

Local Plumbing Inspector Signature: B. Samuel Hedges

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 Inspector to deny a Permit.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner/Applicant: [Signature] Date: 1-1-97

Local Plumbing Inspector Signature: [Signature] Date Approved: 04/13/11

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type Of Structure To Be Served: 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 _____	Plumbing To Be Installed By: 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>10,736,8</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
OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	1	Water Heater
	Fixtures (Subtotal) Column 2	10	Fixtures (Subtotal) Column 1	
		2	Fixtures (Subtotal) Column 2	
		12	Total Fixtures	
		\$	Fixture Fee	
		\$	Transfer Fee	
		\$	Hook-Up & Relocation Fee	
		\$ 48-	Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TRANSFER FEE \$6.00

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