

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering

337-C-0901 Sing

## PROPERTY ADDRESS

Town Or Plantation: Portland  
Street Subdivision Lot #: 31 Stuart St

## PROPERTY OWNERS NAME

Last: Dodley First: John

Applicant Name: Craig + Wall

Mailing Address of Owner/Applicant (If Different): 301 Lincoln St  
So. Portland ME

PORTLAND Date Permit Issued: 04 12 00 \$ 7239 TOWN COPY 24.00  If Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 01124

## 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.

Signature of Owner/Applicant: [Signature] Date: \_\_\_\_\_

## 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: 04/24/11

## 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 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 _____	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>01524</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2	Column 1	
	Number      Type of Fixture	Number      Type of Fixture	
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">OR</p> <div style="border: 1px solid black; padding: 5px; display: inline-block;">                     TRANSFER FEE [\$6.00]                 </div>			
		Hosebibb / Sillcock	
		Floor Drain	1
		Urinal	
		Drinking Fountain	1
		Indirect Waste	1
		Water Treatment Softener, Filter, etc.	1
		Grease / Oil Separator	
		Dental Cuspidor	
		Bidet	
	Other: _____		
	<b>Fixtures (Subtotal) Column 2</b>	4	
		<b>Fixtures (Subtotal) Column 1</b>	
		-	
		<b>Total Fixtures</b>	
		4	
		\$ 24.00 <b>Fixture Fee</b>	
		\$ 2.00 <b>Transfer Fee</b>	
		\$ . <b>Hook-Up &amp; Relocation Fee</b>	
		\$ 44.00 <b>Permit Fee (Total)</b>	

SEE PERMIT FEE SCHEDULE  
FOR CALCULATING FEE

TOWN COPY