

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
 Street Subdivision Lot #: 171 Lexington Ave
PROPERTY OWNERS NAME

Last: Nason Jr. First: Ralph
 Applicant Name: Same
 Mailing Address of Owner/Applicant (If Different):

058373

PORTLAND	PERMIT # 9593	TOWN COPY
Date Permit Issued: <u>10/14/05</u>	\$ <u>12400</u>	<input type="checkbox"/> Double Fee FEE Charged
Local Plumbing Inspector Signature	L.P.I. # <u>362</u>	

338-B-009

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: _____

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: 10/24/05

PERMIT INFORMATION

This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" 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 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 checked="" type="checkbox"/> PROPERTY OWNER LICENSE # _____
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number 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.		
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <b style="font-size: 24px; text-align: center;">OR TRANSFER FEE [\$6.00]		
	Hosebibb / Sillcock	Bathtub (and Shower)
	Floor Drain	Shower (Separate)
	Urinal	Sink
	Drinking Fountain	Wash Basin
	Indirect Waste	Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	Clothes Washer
	Grease / Oil Separator	Dish Washer
	Dental Cuspidor	Garbage Disposal
	Bidet	Laundry Tub
	Other: <u>water heater</u>	Water Heater
	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
		Fixtures (Subtotal) Column 2
		Total Fixtures
		Fixture Fee
		Transfer Fee
		Hook-Up & Relocation Fee
		Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

#124

10/24

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