

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
 Street Subdivision Lot #: Lot 14 Carriage Lane

PROPERTY OWNERS NAME

Last: Brackett Construction First: _____

Applicant Name: Jerry's Plbg & Htg.
 Mailing Address of Owner/Applicant (if Different): 22 Ridgeway Dr. Biddeford, ME 04105

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.

Jerry Brackett 8/19/04
 Signature of Owner/Applicant Date

2004 - ~~8377~~ 8377

PORTLAND Date Permit Issued: 8/26/04 9088 TOWN COPY \$ 314100/1 If Double Fee Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 09641

341 E 00 / 341 A034001

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 | 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING | 1. <input checked="" type="checkbox"/> MASTER PLUMBER |
| 2. <input type="checkbox"/> RELOCATED PLUMBING | 2. <input type="checkbox"/> MODULAR OR MOBILE HOME | 2. <input type="checkbox"/> OIL BURNERMAN |
| | 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING | 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC |
| | 4. <input type="checkbox"/> OTHER - SPECIFY _____ | 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE |
| | | 5. <input type="checkbox"/> PROPERTY OWNER |
| | | LICENSE # <u>122411</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. | 1 | Hosebibb / Sillcock | 1 | Bathtub (and Shower) |
| | | Floor Drain | 1 | Shower (Separate) |
| OR | | Urinal | 1 | Sink |
| | | Drinking Fountain | 1 | Wash Basin |
| HOOK-UP: to an existing subsurface wastewater disposal system. | | Indirect Waste | 1 | Water Closet (Toilet) |
| PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Water Treatment Softener, Filter, etc. | 1 | Clothes Washer |
| | | Grease / Oil Separator | 1 | Dish Washer |
| OR | | Dental Cuspidor | | Garbage Disposal |
| | | Bidet | | Laundry Tub |
| TRANSFER FEE [\$6.00] | | Other: _____ | 1 | Water Heater |
| | | Fixtures (Subtotal) Column 2 | 7 | Fixtures (Subtotal) Column 1 |
| SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE | | | | |
| | | | 1 | Fixtures (Subtotal) Column 2 |
| | | | 8 | Total Fixtures |
| | | | 54 | Fixture Fee |
| | | | | Transfer Fee |
| | | | | Hook-Up & Relocation Fee |
| | | | | Permit Fee (Total) |

308 = 24
 506 = 30
 54 + 10 = 64
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