

# PLUMBING APPLICATION

347-E-005

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	Portland, Me
Street Subdivision Lot #	27 Skylark Ad
Last: <u>Thom</u>	First: <u>Ruth</u>
Applicant Name:	<u>Charles B Stora</u>
Mailing Address of Owner/Applicant (If Different)	<u>55 Middle Ad Cumberland, Me</u>

PORTLAND	7768	TOWN COPY
Date Permit Issued: <u>7/17/01</u>	\$ <u>124.00</u>	<input type="checkbox"/> # Double Fee FEE Charged
Local Plumbing Inspector Signature	L.P.I. # <u>0124</u>	

### 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.

Charles B Stora 7-17-01  
Signature of Owner/Applicant 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

Date Approved

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 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 _____	<b>Plumbing To Be Installed By:</b> 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>L 157A</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
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
<b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]		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: _____	1	Water Heater
		Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
			0	Fixtures (Subtotal) Column 2
			1	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			27	<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE