

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	City of Portland
Street Subdivision Lot #	55 Greenwood

OWNER/APPLICANT INFORMATION

Last: Gavitt First: Stan
 Applicant Name: Salevsky & Sons Plg & Htg Inc
 Mailing Address of Owner/Applicant (If Different): P.O. Box 242 Cape Elizabeth Br. Cape Elizabeth Maine

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: 2-16-09

PORTLAND Date Permit Issued: 2/16/09 7767 TOWN COPY \$ 12410101 If Double Fee Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 011214

348 E 003

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 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>23091</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Silcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	1	Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

348 E 003