

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

Town or Plantation: Portland
 Street Subdivision Lot #: 21 Rice St.
 Last: Thirsh Turf First: _____
 Applicant Name: ARTEMP
 Mailing Address of Owner/Applicant (if Different): 11 Wallace Ave. S. Portland, ME 04106

PERMIT # 0836 STATE COPY
 Date Permit Issued: 3/2/09 \$ 1158.00 If Double Fee Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 0640

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] 3/2/09
 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

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 type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Commercial</u>	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>05685</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
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.	1	Hosebibb / Sillcock		Bathtub (and Shower)
	3	Floor Drain		Shower (Separate)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain		Wash Basin
		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: _____	1	Water Heater
TRANSFER FEE [\$6.00]	4	Fixtures (Subtotal) Column 2	3	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			4	Total Fixtures
			24.00	Permit Fee (Total)
			24.00	
			48.00	
			10.00	
			88.00	

26th
3319

\$24.00 ish
\$6.00 other
\$16.00 Fee