

**PLUMBING APPLICATION**

Blg Permit # 050042

Department of Human Sciences  
Division of Health Engineering

Town or Plantation: **CITY OF PORTLAND**  
Street Subdivision Lot #: **90 ALPINE ROAD**

PORTLAND PERMIT # 9365 TOWN COPY  
Date Permit Issued: **4/27/05** \$ **172.00** FEE Charged  
Local Plumbing Inspector Signature: *[Signature]* L.P.I. # **0726**  
**388 APR 2005**

Last: **MANCINI** First: **JOHN**

Applicant Name: **THE GERBER CO., INC.**  
Mailing Address of Owner/Applicant (If Different): **4 GRAY ROAD FALMOUTH, 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.

**Caution: Inspection Required**  
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

**THE GERBER CO., INC.** 4/21/05  
Signature of Owner/Applicant: *[Signature]* Date

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

**PERMIT INFORMATION**

<b>This Application is for</b>	<b>Type of Structure To Be Served:</b>	<b>Plumbing To Be Installed By:</b>
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	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 _____	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 # <b>100072</b>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture	Column 1 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.	Hosebibb / Sillcock	2 Bathtub (and Shower)
<b>OR</b>	Floor Drain	Shower (Separate)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	Urinal	1 Sink
<b>OR</b>	Drinking Fountain	4 Wash Basin
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Indirect Waste	3 Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	Clothes Washer
	Grease / Oil Separator	Dish Washer
	Dental Cuspidor	1 Garbage Disposal
	Bidet	Laundry Tub
	Other: _____	Water Heater
<input type="checkbox"/> TRANSFER FEE \$6.00	Fixtures (Subtotal) Column 2	11
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>		
	FEE	66.00
	SURCHARGE	20.00
		86.00
		Total Fixtures
		Permit Fee (Total)

TOWN COPY 10/12