

**PLUMBING APPLICATION**

Department of Human Sciences  
Division of Health Engineering

Town or Plantation: Portland  
 Street Subdivision Lot #: 69 Summit  
 Last: STEVEN First: TURNER  
 Applicant Name: James Jackson  
 Mailing Address of Owner/Applicant (if Different): James et SAO

Permit Issued: 3124104 \$ 8410101 FEE Charged  
 Local Plumbing Inspector Signature: A. Rowe L.P.I. # 016412

**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: \_\_\_\_\_ Date: 3-24-04

**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: \_\_\_\_\_

<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 # <u>L9545</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. <b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <b>OR</b> TRANSFER FEE (\$6.00)	<u>2</u>	Hosebibb / Sillcock	<u>2</u>	Bathtub (and Shower)
		Floor Drain	<u>1</u>	Shower (Separate)
		Urinal	<u>1</u>	Sink
		Drinking Fountain	<u>3</u>	Wash Basin
		Indirect Waste	<u>3</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	<u>1</u>	Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	Fixtures (Subtotal) Column 2		<u>11</u>	Total Fixtures
			<u>2</u>	
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				
			<u>84</u>	Permit Fee (Total)

Alt # 1508

84 10 94

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