

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

Town or Plantation: Dover Plains
 Street Subdivision Lot #: 55 MARIAN ST
 Last: ERSTEIN First: 3rd
 Applicant Name: NORMAN C. MARIAN PTH
 Mailing Address of Owner/Applicant (if Different): 96 Shepley Ave

PORTLAND 7575 TOWN COPY
 Date Permit Issued: 1/10/01 \$ 200.00 FEE Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 011241

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: 1/10/01

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: [Signature] Date Approved: [Signature]

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" 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>06145</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. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink Bidet
		Drinking Fountain		Wash Basin
OR 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: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>5</u>	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			<u>0</u>	Total Fixtures
			<u>30</u>	Permit Fee
			<u>40</u>	
			<u>30</u>	

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