

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation: Portland
 Street Subdivision Lot #: 161 Hope Ave ^{LOT # 22}
PROPERTY OWNERS NAME

Last: Volger First: _____
 Applicant Name: Philip Terison
 Mailing Address of Owner/Applicant (If Different): 62 Orchard Rd. Cumberland, Me 04021

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] 3-1-04
 Signature of Owner/Applicant Date

2004-8071

Date Permit Issued: <u>3/1/04</u>	PERMIT # <u>8600</u>	STATE COPY
<u>Jeanie Bernk</u> Local Plumbing Inspector Signature	\$ <u>11410K</u>	<input type="checkbox"/> If Double Fee Charged
	L.P.I. # <u>0732</u>	

392 3022

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>08042</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 OR OR TRANSFER FEE [\$6.00]	2	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	5	Wash Basin
		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		1
		Fixtures (Subtotal) Column 2	16	Total Fixtures
			2	Total Fixtures
			18	Total Fixtures
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

114
10
24