

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 401 ALLEN AVE

PROPERTY OWNERS NAME

Last: Fortin Home Construction LLC First: _____
Applicant Name: ROBERT W MILLS JR
Mailing Address of Owner/Applicant (If Different): 189 Sedge Rd YARMOUTH, ME 04096

2008-8310

PORTLAND
Date Permit Issued: 11/14/08
Local Plumbing Inspector Signature: [Signature]
PERMIT # 10819 TOWN COPY
\$ 1142 FEE If Double Fee Charged
L.P.I. # L.O. 65
401 A 14

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] 10/13/08
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.

[Signature] Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

| This Application is for | Type of Structure To Be Served: | Plumbing To Be Installed By: |
|---|--|---|
| 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>07665</u> |

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | Column 2 | | Column 1 | |
|--|----------|--|---------------------------|------------------------------|
| | Number | Type of Fixture | Number | 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. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system. | <u>2</u> | Hosebib / Sillcock | <u>2</u> | Bathtub (and Shower) |
| | | Floor Drain | | Shower (Separate) |
| <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Urinal | <u>1</u> | Sink |
| | | Drinking Fountain | <u>5</u> | Wash Basin |
| | | Indirect Waste | <u>3</u> | Water Closet (Toilet) |
| | | Water Treatment Softener, Filter, etc. | <u>1</u> | Clothes Washer |
| | | Grease / Oil Separator | <u>1</u> | Dish Washer |
| | | Roof Drain | | Garbage Disposal |
| | | Bidet | | Laundry Tub |
| | | Other: _____ | <u>1</u> | Water Heater |
| | | Fixtures (Subtotal) Column 2 | <u>14</u> | Fixtures (Subtotal) Column 1 |
| | | | <u>2</u> | Fixtures (Subtotal) Column 2 |
| | | <u>16</u> | Total Fixtures | |
| | | | Fixture Fee | |
| | | | Transfer Fee | |
| | | | Hook-Up & Relocation Fee | |
| | | | Permit Fee (Total) | |

OR
TRANSFER FEE (\$6.00)
NOV 14 2008
RECEIVED
DIVISION OF PERMITTING AND INSPECTION
PORTLAND, ME

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

27636