

**PLUMBING APPLICATION**

Department of Human Sciences  
Division of Health Engineering

Town or Plantation: **PORTLAND**  
 Street Subdivision Lot #: **47 DAKOTA ST**  
 Last: **BRODIE** First: **IAN**  
 Applicant Name: **LAVOPA PLUMBING**  
 Mailing Address of Owner/Applicant (If Different): **47 DAKOTA ST PORTLAND ME 04103**

**PORTLAND PERMIT # 10756 TOWN COPY**  
 Date Permit Issued: **9/17/08** \$ **34**  If Double Fee Charged  
 Local Plumbing Inspector Signature: *[Signature]* L.P.I. # **379**

**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: **11/30/08**

**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: **03/24/09**

**PERMIT INFORMATION**

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 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 _____	<b>Plumbing To Be Installed By:</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input checked="" type="checkbox"/> OIL BURNERMAN <b>5612 MS</b> 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <b>8129 MS</b>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	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.		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	1	Wash Basin
<b>OR</b> TRANSFER FEE [\$6.00]		Indirect Waste	1	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		3	
			0	Total Fixtures
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY