

PLUMBING APPLICATION

430-A-008

Department of Human Services
Division of Health Engineering

PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 31 Lennox St

PROPERTY OWNERS NAME

Last: Andrew First: Stephen

Applicant Name: Maitz Titus Blachke P&H

Mailing Address of Owner/Applicant (if Different): 36 Dibiase St
Portland Me 04103

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 Inspector to deny a Permit.

Darryl Blachke 12-30-98
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.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type Of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER — SPECIFY _____

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER / MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # 17881

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.		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	1	Wash Basin
<input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
OR		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
<input type="checkbox"/>		Bidet		Laundry Tub
		Other: _____	1	Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
			4	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$ 16-
\$
\$
\$
\$ 16-

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PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 31 Lennox St

PROPERTY OWNERS NAME

Last: Andrew First: Stephen

Applicant Name: Miaette Titus Blakelock #11

Mailing Address of Owner/Applicant (if Different): 36 Divisock St
Portland Me 04103

PORTLAND
Date Permit Issued: 12-30-98
Local Plumbing Inspector Signature: [Signature]

6719 TOWN COPY
\$ 16 FEE If Double Fee Charged
L.P.I. # 0124

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 Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 12-098

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	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>178811</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR TRANSFER FEE [\$6.00]		1	
		Hosebibb / Sillcock	Bathtub (and Shower)
		Floor Drain	Shower (Separate)
		Urinal	Sink
		Drinking Fountain	Wash Basin
		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	Fixtures (Subtotal) Column 1	
		Fixtures (Subtotal) Column 2	
		Total Fixtures	
		Fixture Fee	
		Transfer Fee	
		Hook-Up & Relocation Fee	
		Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$ 4
 \$
 \$
 \$
 \$ 16