

PLUMBING APPLICATION

20018052

PROPERTY ADDRESS

Town or Plantation: Portland
 Street Subdivision Lot #: 20 Berwick Street

PROPERTY OWNERS NAME

Last: Chapman First: Andrew
 Applicant Name: Andrew Chapman
 Mailing Address of Owner/Applicant (If Different):

PORTLAND PERMIT # 7941 STATE COPY
 Date Permit Issued: 12/28/01 \$ 6161014 If Double Fee Charged
 Local Plumbing Inspector Signature: _____ L.P.I. # 015913

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.

Andrew Chapman 12/28/01
 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.

430 A 019
 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 checked="" 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 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 checked="" type="checkbox"/> PROPERTY OWNER LICENSE # _____

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.	2	Hosebibb / Sillcock (relocate)		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink relocate
		Drinking Fountain	2	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer (relocate)
		Grease / Oil Separator	1	Dish Washer (relocate)
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	8	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			10	Total Fixtures
				Fixture Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE