

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 48 Yale St

PROPERTY OWNERS NAME

Last: BALLARD First: Chris
Applicant Name: Jim Johnson
Mailing Address of Owner/Applicant (If Different): 7 TERRA

PORTLAND Date Permit Issued: 6-2-04 8931 TOWN COPY \$ 90 Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 360
436 A 15

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.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner/Applicant: [Signature] Date: 6-2-04

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 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>2731</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number Type of Fixture
OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<u>2</u> Hosebibb / Sillcock	<u>2</u> Bathtub (and Shower)
	Floor Drain	Shower (Separate)
	Urinal	<u>4</u> Sink
	Drinking Fountain	Wash Basin
	Indirect Waste	<u>3</u> Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	<u>1</u> Clothes Washer
	Grease / Oil Separator	Dish Washer
	Dental Cuspidor	<u>1</u> Garbage Disposal
	Bidet	Laundry Tub
	Other: _____	<u>1</u> Water Heater
TRANSFER FEE [\$6.00]	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
	<u>2</u>	<u>14</u>
		Total Fixtures
		Fixture Fee
		Transfer Fee
		Hook-Up & Relocation Fee
		Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

90
+10
100

90