

PLUMBING APPLICATION

2/15/10 6044 S
 Department of Health and Public Services
 Division of Environmental Health

PROPERTY ADDRESS

Town or Municipality: PORTLAND
 Street: 982 COMBESS ST.
 Subdivision Lot #: _____
PROPERTY OWNERS NAME

List: UNION STATION First

Applicant Name: SCOTT MARSU
 Mailing Address: PO BOX 3374
 Owner/Applicant: PORTLAND, ME. 04104
 (if Different: _____)

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

Date: 2/18/10

Local Plumbing Inspector Signature

Date Approved

P E R M I T I N F O R M A T I O N

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 type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Roof A Center</u>	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFGD. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>R 1 1 6 8</u>
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Hook-Up & Piping Relocation

Maximum of 1 Hook-Up

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.

HOOK-UP: to an existing subsurface wastewater disposal system.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
	Hosebib / Silcock		Bathtub (and Shower)
	Floor Drain		Shower (Separate)
	Urinal		Sink
	Drinker/Column	1	Wash Basin
	Project Waste	1	Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.		Clothes Washer
	Roof Drain		Dish Washer
	Roof Drain		Garbage Disposal
	Other: _____	1	Laundry Tub
	Fixtures (Subtotal) Column 2	3	Water Heater
			Fixtures (Subtotal) Column 1
			Fixtures (Subtotal) Column 2

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Permit Fee	
Fixture Fee	
Transfer Fee	
Hook-Up & Relocation Fee	
Permit Fees (Total)	

Port A Center

RECEIVED
 FEB 18 2010
 Dept. of Building Inspections
 City of Portland, Maine

64A-1
 PERMIT # 11202, TOWN COPY
 Date Permit Issued: 2/18/10
 Local Plumbing Inspector Signature: [Signature]
 L.P.I. # 07732
 2-23-10 SMH Caution: Inspection Required - Tests ok
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.
 Close
 Close Permit, SMH 3-16-10