Page 1 of 1 HHE-211 Rev. 6:94			SEE PERMIT	[\$6,00]	TRANSFER FEE				new fixtures.	PIPING RELOCATION: of sanitary	HOOK-UP: to an existing subsurface wastewater disposal system.		the local Sanitary District.	HOUR-UP: to public sewer in those cases where the connection is not regulated and inconcred by		Hook-Up & Piping Relocation		4. ☐ OTHER = SPECIFY	PLUMBING 3. U M	RELOCATED 9	1 CINIC	This Application is for		I certify that the unformation submitted is correct to the best of my knowledge and understand that any falsification is reason for the Plumbing hispectors to derry a Permit. Signature of Owner/Applicant	Mailing Address of Owner/Applicant L.Z. A.M.M.// ST	PHC SX	OPERTY OWNERS N	Plantation Street Subdivision Lot # 440/AP & S	PLUMBING APPLICATION PROPERTY ADDRESS
TOWN CODY			SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	Fixtures (Subtotal) Column 2	Other:	Bidet	Dental Cuspidor	Grease / Oil Separator	Water Treatment Softener, Filter, etc.	Indirect Waste	Drinking Fountain	Urinal	Floor Drain	Hosebibb / Sillcock	Number Type of Fixture	Column		SPECIFY	MULTIPLE FAMILY DWELLING TO MODUCAN OR MOBILE HOME	SINGLE FAMILY DWELLING	T FAMILY STITE TO BE SETVED:	PERMIT INFORMATION	Dale	Local	PH	ADELO TOPO	Date Permit Issuper	TOPE -	80-1
Hook-Up & Relocation Fee Permit Fee [Total]	Transfer Fee	Fixture Fee	Column 2 Total Fixtures	Fixtures (Subtotal) Column 1	Water Heater	Laundry Tub	Garbage Disposal	Dish Washer	Clothes Washer	Water Closet (Toilet)	Wash Basin	Sink	Shower (Separate)	Bathtub (and Shower)	Number Column 1 Type of Fixture	LICENSE #RUD OV 14	5. PROPERTY OWNER	4. PUBLIC UTILITY EMPLOYEE	2. OIL BURNERMAN	\Box	Plumbing To Be Installed By:		Local Plumbing Inspector Signature Date Approved	Caution: Inspection Required I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.		Industria Signature L.P.I. # 0, 1, 1, 2, 5	S S S S S S S S S S S S S S S S S S S		Division of Health Engineering