

85-F-11

ISLAND

AW 2

PEATS

ISLAND

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 769-3626

*Myself* *Signature*

## PROPERTY ADDRESS

Town or Plantation: \_\_\_\_\_

Street Subdivision Lot #: 85-F-11 del. n/b

## PROPERTY OWNERS NAMES

Applicant Name: \_\_\_\_\_

(If Single Applicant of Owner, Applicant of District)

Permit # 1311881 Date Jan 13 1988

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

## Owner/Applicant Statement

I hereby certify the information submitted is correct to the best of my knowledge and understanding, and that any falsification is a violation of the Local Plumbing Inspector's Rules.

Signature of Owner/Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Caution - Inspection Required

This inspection is required for installation submitted above and found to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

## PERMIT INFORMATION

<b>This Application is for:</b> <input type="checkbox"/> NEW PLUMBING <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure to be Served:</b> <input type="checkbox"/> SINGLE FAMILY DWELLING <input type="checkbox"/> MODULAR OR MOBILE HOME <input type="checkbox"/> MULTIPLE FAMILY DWELLING <input type="checkbox"/> OTHER SPECIFY _____	<b>Plumber to be Installed by:</b> <input type="checkbox"/> PLUMBER <input type="checkbox"/> JOURNELLER <input type="checkbox"/> MECHANIC <input type="checkbox"/> HOUSING DEALER <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE <input type="checkbox"/> PROPERTY OWNER LICENSE # _____
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Number	Hook-Ups And Piping Relocation	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		Hose/Sillcock		Bath/Tub and Shower
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK-UP to an existing subsurface wastewater disposal system		Drinking Fountain		Wash Basin
			Indirect Waste		Water Closet (Toilet)
			Water Treatment Strainer, Filter, etc.		Clothes Washer
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cupboard		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other		Water Heater
	Hook-Up Fees		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE FOR CALCULATING PEF

Total Fixtures