

PLUMBING APPLICATION

Department of Human Services
 Director of Public Health
 Portland, Oregon 97208

Town of PORTLAND
 Applicant Name: STEVENS, GARY DORIS
 Address: 15700 N. BURNING BUSH
 City: PORTLAND State: OR Zip: 97224
 Signature of Owner/Applicant: _____ Date: _____
 Local Plumber: _____ License # _____
 Inspector: _____ License # _____

PORTLAND PERMIT # 2,760 TOWN COPY
 Date Permit Issued: 12.5.88 FEE: 195
 License # _____ L.P. # _____
 Level of Licensing Inspector Signature: _____

Owner/Applicant Statement
 I hereby declare that the information submitted is correct to the best of my knowledge and understanding, and that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Caution: Inspection Required
 I have inspected the work shown above and found it to be in compliance with the applicable code.

Signature of Owner/Applicant: _____ Date: _____ Local Plumber: _____ License # _____ Inspector: _____ License # _____

PERMITS INFORMATION

This Application is for:	Type Of Structure To Be Served:	Permit To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	1. <input type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> PLUMBING MAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG. D.H. USING DESIGNER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input 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 municipal sewer disposal system.		Hose/Sink / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Indirect Waste		Water Closet (Toilet)
		Water Treatment (Softener, Filter, etc.)		Clothes Wrecker
		Grease/Oil Separator		Dish Washer
		Dental Cusplator		Garbage Disposal
Number of Hook-Ups & Relocations		Sides		Laundry Tub
		Other: _____		Water Heater
Hook-Up & Relocation Fee		Fixtures (Column 2)		Fixtures (Column 1)
			3	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE