

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 223-3626

PROPERTY ADDRESS

Town Or Plantation: Holland Park, ME

Street Subdivision Lot #: Brownville Road Sect. E

PROPERTY OWNERS NAME

Last: SMITH First: ROAD

Applicant Name: A. F. DUBE

Mailing Address of Owner/Applicant (if Different): 101 575, Scarborough, ME

PORTLAND PERMIT # 3,438 TOWN COPY

Date Permit Issued: 5/20/87 Fee: 1210.10 Double Fee Charged:

L.P.I. # 1123

Local Plumbing Inspector Signature: _____

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is a reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 5-20-87

Caution: Inspection Required

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

Local Plumbing Inspector Signature: _____ Date Approved: 6/1/87

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY: _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>10,236,7</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1		
	Number	Type of Fixture	Number	Type Of Fixture	
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Hosebibb / Silcock	1	Cathub (and Shower)	
			Floor Drain	1	Shower (Separate)
			Urinal	1	Sink
			Drinking Fountain	2	Wash Basin
			Indirect Waste	2	Water Closet (Toilet)
			Water Treatment, Softener, Filter, etc.	1	Clothes Washer
			Grease/Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
			Bidet		Laundry Tub
			Other: _____		Water Heater
Number of Hook-Ups & Relocations					
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	8	Fixtures (Subtotal) Column 1	
				Fixtures (Subtotal) Column 2	
			8	Total Fixtures	
				Plumbing Fee	
				Hook-Up & Relocation Fees	
			\$ 34	Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

PERMIT # 001782 CITY OF Portland BUILDING PERMIT APPLICATION

Please fill out any part which applies to job. Proper plans must accompany form.

MAP # _____ LOT# _____

Owner: H. R. Bradley Smith - 766-5520

Address: Beach Way, Peaks Island, 04108

LOCATION OF CONSTRUCTION Lots 8 & 9 Beach Way 603- pp 1 island

CONTRACTOR: Harvey H. Smith SUBCONTRACTORS: 878-1027

ADDRESS: Box 62, Twillingate Rd., Temple, N.H. 03084

Est. Construction Cost: \$25,000 Type of Use: single family

Past Use: _____

Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain To construct new addition: 1 plot plan and 1 set of floor plans submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil: _____

2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____

4. Foundation Size: _____

5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.

2. Girdler Size: _____

3. Lally Column Spacing: _____ Size: _____

4. Joists Size: _____ Spacing 16" O.C.

5. Bridging Type: _____ Size: _____

6. Floor Sheathing Type: _____ Size: _____

7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____

2. No. windows _____

3. No. Doors _____

4. Header Sizes _____ Span(s) _____

5. Bracing: Yes _____ No _____

6. Corner Posts Size _____

7. Insulation Type _____ Size _____

8. Sheathing Type _____ Size _____

9. Siding Type _____ Weather Exposure _____

10. Masonry Materials _____

11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____

2. Header Sizes _____ Span(s) _____

3. Well Covering Type _____

4. Fire Wall if required _____

5. Other Materials _____

For Official Use Only

Date: March 15, 1987 Subdivision: Yes / No _____

Inside Fire Limits: _____ Name: _____

Bldg Code: _____ Lot: _____

Time Limit: _____ Block: _____

Estimated Cost: \$25,000 Permit Expiration: _____

Value/Structure: _____ Owner: _____

For \$145.00 _____

Ceilings:

1. Ceiling Joist Size: _____

2. Ceiling Strapping Size: _____ Spacing: 16" O.C.

3. Type Ceilings: _____

4. Insulation Type _____ Size _____

5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size: _____

2. Sheathing Type: _____

3. Roof Covering Type: _____

4. Other: _____

Chimneys:

Type: _____ Number of Fire Places: _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Req: red Yes _____ No _____

Plumbing:

1. Approval of soil test if required: Yes _____ No _____

2. No. of Tubs or Showers: _____

3. No. of Sinks: _____

4. No. of Lavatories: _____

5. No. of Other Fixtures: _____

Swimming Pools:

1. Type: _____

2. No: _____

3. Must comply with National Electrical Code and State Law: _____

Zoning:

District: _____ Street Front: _____ Req: _____ Provided: _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance: _____ Site Plan: _____ Subdivision: _____

Short and Floodplain Mgmt: _____ Special Exception: _____

Other (Explain): _____

Date Approved: _____

Permit Received By: Nancy Grossman

Signature of Applicant: Harvey H. Smith 15 MARCH 1987

Signature: EC 700 Date: _____

Inspection Dates: _____