

**PLUMBING APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**

Town Or Plantation: Portland  
Street: Boskshay Rd  
Subdivision Lot #: Boskshire Village 1

**PROPERTY OWNERS NAME**

Last: CURRY First: Greg

Applicant Name: Jim Michaud

Mailing Address of Owner/Applicant (if Different): 281 Main St Westbrook

PORTLAND PERMIT # 3,080 TOWN COPY  
Date Permit Issued: 9/19/88 \$ 156 FEE Charged  Double Fee Charged   
Local Plumbing Inspector Signature: [Signature] L.P.I. # \_\_\_\_\_

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and unders and that any falsification is reason for the Local Plumbing Inspector to deny a Permit.  
Signature of Owner/Applicant: [Signature] Date: \_\_\_\_\_

**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: **SEP 20 1988**

**PERMIT INFORMATION**

<b>This Application is for</b>	<b>Type Of Structure To Be Served:</b>	<b>Plumbing To Be Installed By:</b>
1. <input type="checkbox"/> NEW PLUMBING	1. <input 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"/> OIL BURNERMAN
	3. <input checked="" 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>LF 481</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
6 HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR HOOK-UP: to an existing subsurface wastewater disposal system.		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 Washer
Number of Hook-Ups & Relocations		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Hook-Up & Relocation Fee		Bidet		Laundry Tub
		Other		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY