

**PLUMBING APPLICATION**

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

PROPERTY ADDRESS

Town Or Plantation: Portland

Street: 10-1374-21 Popham

Subdivision Lot #: ONE BUILDING

PROPERTY OWNERS NAME

Last: Portland Housing Authority First:

Applicant Name:

Address of Owner/Applicant (If Different): 1 CUMBRLAND AVE

PORTLAND PERMIT # 2,022 APPLICANTS COPY

Date Permit Issued: 10/16/86  Double Fee Charged

*Charles P. Wald* L.P.I. # \_\_\_\_\_  
Local Plumbing Inspector Signature

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

**Owner/Applicant Statement**

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

*Charles P. Wald* 10/16/86  
Signature of Owner/Applicant Date

**Caution: Inspection Required**

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

*Charles P. Wald* FEB 17 1987  
Local Plumbing Inspector Signature Date Approved

**PERMIT INFORMATION**

This Application is for:

1.  NEW PLUMBING

2.  RELOCATED PLUMBING

Type Of Structure To Be Served:

1.  SINGLE FAMILY DWELLING

2.  MODULAR OR MOBILE HOME

3.  MULTIPLE FAMILY DWELLING 2 Family

4.  OTHER - SPECIFY: \_\_\_\_\_

Plumbing To Be Installed By:

1.  MASTER PLUMBER

2.  OIL BURNERMAN

3.  MFG'D. HOUSING DEALER / FRANCH

4.  PUBLIC UTILITY EMPLOYEE

5.  PROPERTY OWNER

LICENSE # 16541

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type of Fixture	Number	Column 1 Type Of Fixture
	HOOK-UP: to sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
			Floor Drain		Snow (Separate)
			Urinal		Sink
	HOOK-UP: to an existing subsurface wastewater disposal system.		Drinking Fountain		Wash Basin
			Indirect Waste		Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
<u>1</u>	PIPING RELOCATION: of sanitary lines, drains, and new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other _____		Water Heater
<u>\$6.00</u>	Hook-Up Fee		Fixtures (Subtotal) Column 2	<u>1</u>	Fixtures (Subtotal) Column 1
					Fixtures (Subtotal) Column 2
					Total Fixtures
					Fixtures Fee
					Hook-Up Fee
				<u>\$6.00</u>	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

**PLUMBING APPLICATION**

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

**PROPERTY ADDRESS:**  
Town Or Plan: Portland  
Street: 10-12-11-21 Popham  
Subdivision Lot #: ONE BUILDING  
**PROPERTY OWNERS NAME:**  
Last: Portland Housing Authority  
First:  
Applicant Name:  
Mailing Address of Owner/Applicant (if different): 211 Cumberland Ave

PORTLAND PERMIT # 2,022 TOWN COPY  
Date: Nov 4 1986  
Local Plumbing Inspector Signature: [Signature]  
L.P.I. # \_\_\_\_\_  
FEE: \_\_\_\_\_  
Double Fee Charge: \_\_\_\_\_

**Owner/Applicant Statement**  
I certify that the info. herein submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.  
Richard P. Walsh, RLL, PLS, COINC. 0212-96  
Signature of Owner/Applicant 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: NOV 4 - 1986

**PERMIT INFORMATION**

This Application is for:  
1.  NEW PLUMBING  
2.  RELOCATED PLUMBING

Type Of Structure To Be Served:  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING 2 Family  
4.  OTHER - SPECIFY: \_\_\_\_\_

Plumbing To Be Installed By:  
1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D. HOUSING DEALER/MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER  
LICENSE # 16411

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.		Hosebib / Sillcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK-UP: to an existing subsurface waste water disposal system.		Drinking Fountain		Wash Basin
			Indirect Waste		Water Close (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (lots)		Other: _____		Water Heater
\$ 6.00	Hook Up Fee		Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
					Fixtures (Subtotal) Column 2
					Total Fixtures
				\$	Fixture Fee
				\$	Hook-Up Fee
				\$ 6.00	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE