

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 282-3826

TOWN OR PARISH Portland City
PROPERTY ADDRESS 55 Commercial St
Town Or Parish Portland
Street Subdivision Lot # Commercial St
PROPERTY OWNERS NAME City of Portland
Last: City of Portland **First:** Portland
Applicant Name: City of Portland
Mailing Address of Owner/Applicant (If Different) 55 Commercial St

PLUMBING PERMIT
 FURT. No. 4192 4447 TOWN COPY
 Date of Issue 4/1/92 \$ 9.00 Fee
 Chief Plumbing Inspector Signature [Signature] L.P.L.R. 0124

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.
 Signature of Owner/Applicant [Signature] Date 4-1-92

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 [Signature] Date Approved 4/24/92

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input checked="" 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>2080</u>

Hook-Up & Piping Re-location Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixtures	
	Number	Type of Fixture	Number	Type of Fixtures
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 existing subsurface wastewater disposal system.		Hose/bb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (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
Number of Hook-Ups & Relocations		Other: _____	1	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

3	Oil Fixtures
8	Relocation
9	Permit Fee (Total)