PLUMBING APPLICAT	ION		Maine DHHS/CD0	C - Division	of Enviror	mental 8	Comn	nunity Health	
PROPERTY ADDRESS			ISSUING MUNICIPAL OFFICE						
City, Town, or Plantation	udiouhan		Town/City						
1.5	Boyview Love.		Permit #			Total Fee \$			
PROPERTY OWNER			Date Issued			Double I	ee		
Name (Last, First)	Hay June								
Applicant Name (Last, First) Braken Time			Local Plumbing Inspector Signature License #						
OWNER/APPLICANT MAILING ADDRESS			FEES State \$			Local \$			
Street 537 E(MSF				Vlap #		Lot#			
City Madborgugh		Int	Internal plumbing fixtures and piping may not be installed until a perr issued by the Local Plumbing Inspector. The permit authorizes the o						
State CA Zip Code 0(75)			or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.						
OWNER/APPLICAN	IT STATEMENT		application and the t	Mario Guido					
I certify that the information submitted is and understand that any falsification Inspector(s) to de	is reason for the Local Plumbing	I	CAUT have inspected the i compliance wi	ION: INSPI estallation a h the Maine	uthorized	above an	d found	d it to be in ion.	
Signature of Owner/Applicant Date			LPI Signature				Date (Rough-In)		
Сору:		State				Date (Final)			
	PERMIT IN	FORM	ATION						
This application is for:	Type of structure to be served:	Type of structure to be served: Plumbing				to be installed by:			
New Plumbing	Single Family Residence Modular or Mobile Home Multiple Family Dwelling		Master Plur			e#			
Relocated Plumbing			Oil Burner Inst			e#			
			Mfd. Housing Rep.		Licens	cense#			
	Other (specify below)	X	Public Utility	Rep.	Licens	e#			
	Cano		Property Owner				,		
Column 1 - Hook-Up & Relocation Column 2 - Fixtures			Column	- Fixtures					
Maximum 1 Hook-Up	Type of Fixture	Qty	Type of Fix	e of Fixture		State of Maine		f Maine	
Hook-Up (a)	Hosebib/Sillcock	ĺ	Bathtub (ar	Bathtub (and Shower)		Department of Health and Human Services/ Center for Disease Contro and Prevention Environmental & Community Health – Subsurface Wastewater			
Hook-up to public sewer in those cases	Floor Drain		Shower (Separate)		i				
where the connection is not regulated and inspected by the local sanitary	Urinal			Sink					
district.	Drinking Fountain		V	Wash Basin					
Hook-Up (b)	Indirect Waste		Water Clo	Water Closet (Toilet)		286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070			
Hook-up to an existing subsurface wastewater disposal system.	Treatment Softener, Filter, etc.		Clothes Washer						
	Grease/Oil Separator		Dishwasher						
Piping Relocation	Roof Drain		Garbage Disposal			HHE-211			
Relocation of sanitary lines, drains, and piping without new fixtures.	Bidet		L	aundry Tub	b		Revised 7/24/2018		
	Other: Well sun	1	W	ater Heater					
Total Column 1 +	Total Column 2	2	+ Tota	Column 3	5	4000		otal Fixtures ps Below	
				Total Fix	tures / Ho	ok-Ups		7	
PERMIT TR	ANSFER ONLY \$10.00				Per-Fix	ture Fee			
		TOTAL PERMIT FEE							