

PLUMBING APPLICATION

MAP/LOT: _____

APPLICATION # _____

PROPERTY ADDRESS

| | |
|--|---|
| <p>TOWN: <u>SCARBOROUGH</u></p> <p>STREET ADDRESS: _____</p> <p style="text-align: center;">PROPERTY OWNERS NAME</p> <p>LAST: _____ FIRST: _____</p> <p>APPLICANT NAME: _____</p> <p>APPLICANT MAILING ADDRESS: _____</p> <p>APPLICANT PHONE #: _____</p> <p>EMAIL ADDRESS: _____</p> | <p><u>CAUTION: PERMIT REQUIRED</u></p> <p>Plumbing shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing in accordance with this application and the Maine Plumbing Rules.</p> |
| <p style="text-align: center;">OWNER/APPLICANT STATEMENT</p> <p>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 Inspectors to deny a Permit</p> <p>Signature of Owner/Applicant _____ Date _____</p> | <p><u>CAUTION: Inspection Required</u></p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.</p> <p>Local Plumbing Inspector Signature _____ Date RI _____ Date Final _____</p> |

PERMIT INFORMATION

| <p>This Application is for:</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> | <p>Type of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER – SPECIFY _____</p> | <p>Plumbing To Be Installed By:</p> <p>1. <input type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|-----------------|--|------------------|--|-------------|--|--------|--|-------------------|--|----------------|--|--|--|----------------------|--|------------|--|-------|--|--------------|--|-----------------------------|---|--------|-----------------|--|----------------------|--|-------------------|--|------|--|------------|--|-----------------------|--|----------------|--|-------------|--|------------------|--|-------------|--|--------------|--|-----------------------------|--|------------------------------|--|-----------------------|--|-----------------------------------|--|--------------|--|--------------------------|--|---------------------------|
| <p>Hook-up & Piping Relocation Maximum of 1 Hook-up</p> <p>_____ <u>HOOK-UP:</u> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center;">OR</p> <p>_____ <u>HOOK-UP:</u> to an existing subsurface wastewater disposal system.</p> <p>_____ <u>PIPING RELOCATION:</u> of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center;">OR</p> <p>_____ TRANSFER FEE (\$10.00)</p> | <p>Column 2</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td> </td><td>Hosebib/Sillcock</td></tr> <tr><td> </td><td>Floor Drain</td></tr> <tr><td> </td><td>Urinal</td></tr> <tr><td> </td><td>Drinking Fountain</td></tr> <tr><td> </td><td>Indirect Waste</td></tr> <tr><td> </td><td>Water Treatment Softener, Filter, etc.</td></tr> <tr><td> </td><td>Grease/Oil Separator</td></tr> <tr><td> </td><td>Roof Drain</td></tr> <tr><td> </td><td>Bidet</td></tr> <tr><td> </td><td>Other: _____</td></tr> <tr><td> </td><td>Fixture (Subtotal) Column 2</td></tr> </tbody> </table> | Number | Type of Fixture | | Hosebib/Sillcock | | Floor Drain | | Urinal | | Drinking Fountain | | Indirect Waste | | Water Treatment Softener, Filter, etc. | | Grease/Oil Separator | | Roof Drain | | Bidet | | Other: _____ | | Fixture (Subtotal) Column 2 | <p>Column 1</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td> </td><td>Bathtub (and Shower)</td></tr> <tr><td> </td><td>Shower (Separate)</td></tr> <tr><td> </td><td>Sink</td></tr> <tr><td> </td><td>Wash Basin</td></tr> <tr><td> </td><td>Water Closet (Toilet)</td></tr> <tr><td> </td><td>Clothes Washer</td></tr> <tr><td> </td><td>Dish Washer</td></tr> <tr><td> </td><td>Garbage Disposal</td></tr> <tr><td> </td><td>Laundry Tub</td></tr> <tr><td> </td><td>Water Heater</td></tr> <tr><td> </td><td>Fixture (Subtotal) Column 1</td></tr> <tr><td> </td><td>Fixtures (Subtotal) Column 2</td></tr> <tr><td> </td><td>Total Fixtures</td></tr> <tr><td> </td><td>Fixture Fee (\$10.00 per Fixture)</td></tr> <tr><td> </td><td>Transfer Fee</td></tr> <tr><td> </td><td>Hook-Up & Relocation Fee</td></tr> <tr><td> </td><td>PERMIT FEE (TOTAL)</td></tr> </tbody> </table> | Number | Type of Fixture | | Bathtub (and Shower) | | Shower (Separate) | | Sink | | Wash Basin | | Water Closet (Toilet) | | Clothes Washer | | Dish Washer | | Garbage Disposal | | Laundry Tub | | Water Heater | | Fixture (Subtotal) Column 1 | | Fixtures (Subtotal) Column 2 | | Total Fixtures | | Fixture Fee (\$10.00 per Fixture) | | Transfer Fee | | Hook-Up & Relocation Fee | | PERMIT FEE (TOTAL) |
| Number | Type of Fixture | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Hosebib/Sillcock | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Floor Drain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Urinal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Drinking Fountain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Indirect Waste | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Water Treatment Softener, Filter, etc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Grease/Oil Separator | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Roof Drain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Bidet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Other: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Fixture (Subtotal) Column 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number | Type of Fixture | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Bathtub (and Shower) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Shower (Separate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Sink | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Wash Basin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Water Closet (Toilet) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Clothes Washer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Dish Washer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Garbage Disposal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Laundry Tub | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Water Heater | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Fixture (Subtotal) Column 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | Total Fixtures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Fixture Fee (\$10.00 per Fixture) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Transfer Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Hook-Up & Relocation Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | PERMIT FEE (TOTAL) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Minimum Fee: \$40.00 Fixture Fee: \$10.00</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |