

PLUMBING APPLICATION

Maine DHHS/CDC -- Division of Environmental & Community Health

PROPERTY ADDRESS			ISSUING MUNICIPAL OFFICE			
City, Town, or Plantation			Town/City			
Street/Subdivision Lot #			Permit #		Total Fee	\$
PROPERTY OWNER INFORMATION			Date Issued		Double Fee	
Name (Last, First)						
Applicant Name (Last, First)			Local Plumbing Inspector Signature		License #	
OWNER/APPLICANT MAILING ADDRESS			FEES		State \$	
Street			Local		\$	
City			LOCATION		Map #	
State			Lot #			
Zip Code			Internal plumbing fixtures and piping may not be installed until a permit is issued by the Local Plumbing Inspector. The permit authorizes the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.			
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(s) to deny a permit.			CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.			
Signature of Owner/Applicant			Date		LPI Signature	
					Date (Rough-In)	
Copy: Property Owner <input type="checkbox"/>			Town <input type="checkbox"/>		State <input type="checkbox"/>	
					Date (Final)	

PERMIT INFORMATION			
This application is for:		Type of structure to be served:	
New Plumbing <input type="checkbox"/>		Single Family Residence <input type="checkbox"/>	
Relocated Plumbing <input type="checkbox"/>		Modular or Mobile Home <input type="checkbox"/>	
		Multiple Family Dwelling <input type="checkbox"/>	
		Other (specify below) <input type="checkbox"/>	
		Plumbing to be installed by:	
		Master Plumber <input type="checkbox"/>	License # <input type="text"/>
		Oil Bumer Installer <input type="checkbox"/>	License # <input type="text"/>
		Mfd. Housing Rep. <input type="checkbox"/>	License # <input type="text"/>
		Public Utility Rep. <input type="checkbox"/>	License # <input type="text"/>
		Property Owner <input type="checkbox"/>	

Column 1 -- Hook-Up & Relocation	Column 2 -- Fixtures	Column 3 -- Fixtures	State of Maine Department of Health and Human Services/ Center for Disease Control and Prevention Environmental & Community Health -- Subsurface Wastewater 286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070 HHE-211 Revised 7/24/2018		
Maximum 1 Hook-Up	Type of Fixture	Qty		Type of Fixture	Qty
Hook-Up (a) <input type="checkbox"/> <i>Hook-up to public sewer in those cases where the connection is not regulated and inspected by the local sanitary district.</i>	Hosebib/Sillcock			Bathtub (and Shower)	
	Floor Drain			Shower (Separate)	
	Urinal			Sink	
	Drinking Fountain			Wash Basin	
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to an existing subsurface wastewater disposal system.</i>	Indirect Waste			Water Closet (Toilet)	
	Treatment Softener, Filter, etc.			Clothes Washer	
	Grease/Oil Separator			Dishwasher	
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>	Roof Drain			Garbage Disposal	
	Bidet		Laundry Tub		
	Other: <input type="text"/>		Water Heater		

Total Column 1 + Total Column 2 + Total Column 3 = Enter Total Fixtures / Hook-Ups Below

PERMIT TRANSFER ONLY <input type="checkbox"/> \$10.00	Total Fixtures / Hook-Ups	<input type="text"/>
	Per-Fixture Fee?	<input type="text"/>
	TOTAL PERMIT FEE	<input type="text"/>