

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			
Name (Last, First)				Double Fee			
Applicant Name (Last, First)				Local Plumbing Inspector Signature		License #	
OWNER/APPLICANT MAILING ADDRESS				FEES		State \$	
Street				Local		\$	
City				LOCATION		Map #	
State		Zip Code		Lot #			
OWNER/APPLICANT STATEMENT				CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.			
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.							
Signature of Owner/Applicant		Date		LPI Signature		Date (Rough-In)	
Copy:		Property Owner ☐		Town ☐		State ☐	
						Date (Final)	

PERMIT INFORMATION											
This application is for: New Plumbing ☐ Relocated Plumbing ☐		Type of structure to be served: Single Family Residence ☐ Modular or Mobile Home ☐ Multiple Family Dwelling ☐ Other (specify below)		Plumbing to be installed by:							
				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Master Plumber</td> <td>License #</td> </tr> <tr> <td>Oil Burner Installer</td> <td>License #</td> </tr> <tr> <td>Mfd. Housing Rep.</td> <td>License #</td> </tr> <tr> <td>Public Utility Rep.</td> <td>License #</td> </tr> <tr> <td>Property Owner</td> <td></td> </tr> </table>		Master Plumber	License #	Oil Burner Installer	License #	Mfd. Housing Rep.	License #
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Mfd. Housing Rep.	License #										
Public Utility Rep.	License #										
Property Owner											

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) ☐ <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) ☐ <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>	Indirect Waste		Water Closet (Toilet)		
	Treatment Softener, Filter, etc.		Clothes Washer		
	Grease/Oil Separator		Dishwasher		
Piping Relocation ☐ <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>	Roof Drain		Garbage Disposal		
	Bidet		Laundry Tub		
	Other:		Water Heater		

Total Column 1	+	Total Column 2	+	Total Column 3	=	Enter Total Fixtures / Hook-Ups Below
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PERMIT TRANSFER ONLY <input style="width:20px;" type="checkbox"/> \$10.00	Total Fixtures / Hook-Ups	
	Per-Fixture Fee	\$
	TOTAL PERMIT FEE	\$