

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		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 <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:		Plumbing to be installed by:																												
<table border="1" style="width:100%;"> <tr> <td>New Plumbing</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Relocated Plumbing</td> <td><input type="checkbox"/></td> </tr> </table>		New Plumbing	<input type="checkbox"/>	Relocated Plumbing	<input type="checkbox"/>	<table border="1" style="width:100%;"> <tr> <td>Single Family Residence</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Modular or Mobile Home</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Family Dwelling</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other (specify below)</td> <td><input type="checkbox"/></td> </tr> </table>		Single Family Residence	<input type="checkbox"/>	Modular or Mobile Home	<input type="checkbox"/>	Multiple Family Dwelling	<input type="checkbox"/>	Other (specify below)	<input type="checkbox"/>	<table border="1" style="width:100%;"> <tr> <td>Master Plumber</td> <td>License #</td> <td><input type="text"/></td> </tr> <tr> <td>Oil Burner Installer</td> <td>License #</td> <td><input type="text"/></td> </tr> <tr> <td>Mfd. Housing Rep.</td> <td>License #</td> <td><input type="text"/></td> </tr> <tr> <td>Public Utility Rep.</td> <td>License #</td> <td><input type="text"/></td> </tr> <tr> <td>Property Owner</td> <td></td> <td></td> </tr> </table>		Master Plumber	License #	<input type="text"/>	Oil Burner Installer	License #	<input type="text"/>	Mfd. Housing Rep.	License #	<input type="text"/>	Public Utility Rep.	License #	<input type="text"/>	Property Owner		
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Column 1 - Hook-Up & Relocation		Column 2 - Fixtures		Column 3 - Fixtures																												
Maximum 1 Hook-Up		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																												

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

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