

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				<p>CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</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 Inspector(s) to deny a permit.</p>							
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:																												
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Column 1 – Hook-Up & Relocation		Column 2 – Fixtures		Column 3 – Fixtures																												
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	<input type="text"/>	Bathtub (and Shower)	<input type="text"/>																											
		Floor Drain	<input type="text"/>	Shower (Separate)	<input type="text"/>																											
		Urinal	<input type="text"/>	Sink	<input type="text"/>																											
		Drinking Fountain	<input type="text"/>	Wash Basin	<input type="text"/>																											
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>		Indirect Waste	<input type="text"/>	Water Closet (Toilet)	<input type="text"/>																											
		Treatment Softener, Filter, etc.	<input type="text"/>	Clothes Washer	<input type="text"/>																											
		Grease/Oil Separator	<input type="text"/>	Dishwasher	<input type="text"/>																											
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>		Roof Drain	<input type="text"/>	Garbage Disposal	<input type="text"/>																											
		Bidet	<input type="text"/>	Laundry Tub	<input type="text"/>																											
		Other:	<input type="text"/>	Water Heater	<input type="text"/>																											

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 + 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"/>