

# 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				LOCATION		Local \$	
City				Map #		Lot #	
State		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.				<b>CAUTION: INSPECTION REQUIRED</b> 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)	
<b>Copy:</b>		Property Owner <input type="checkbox"/>		Town <input type="checkbox"/>		State <input type="checkbox"/>	
						Date (Final)	

PERMIT INFORMATION					
<b>This application is for:</b>		<b>Type of structure to be served:</b>		<b>Plumbing to be installed by:</b>	
New Plumbing <input type="checkbox"/>		Single Family Residence <input type="checkbox"/>		Master Plumber <input type="checkbox"/> License # <input type="text"/>	
Relocated Plumbing <input type="checkbox"/>		Modular or Mobile Home <input type="checkbox"/>		Oil Burner Installer <input type="checkbox"/> License # <input type="text"/>	
		Multiple Family Dwelling <input type="checkbox"/>		Mfd. Housing Rep. <input type="checkbox"/> License # <input type="text"/>	
		Other (specify below) <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	
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 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 <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
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<b>PERMIT TRANSFER ONLY</b> <input type="checkbox"/>	\$10.00	<b>Total Fixtures / Hook-Ups</b>	
		<b>Per-Fixture Fee</b>	\$
		<b>TOTAL PERMIT FEE</b>	\$

**Brief Description of Work:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_