

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 \$		Local \$	
Street				LOCATION Map #		Lot #	
City				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.			
State		Zip Code					
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: New Plumbing <input type="checkbox"/> Relocated Plumbing <input type="checkbox"/> HUD Homes (axles) <input type="checkbox"/> Manufactured Housing <input type="checkbox"/>		Type of structure to be served: 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"/>		Plumbing to be installed by: Master Plumber <input type="checkbox"/> License # <input type="text"/> Mfd. Housing 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 2/15/2024			
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							
		Floor Drain							
		Urinal							
		Drinking Fountain							
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>		Indirect Waste							
		Treatment Softener, Filter, etc.							
		Grease/Oil Separator							
		Roof Drain							
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures within the structure.</i>		Bidet							
		Other: <input type="text"/>							
		Water Heater							
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			
						Per-Fixture Fee		\$	
						TOTAL PERMIT FEE		\$	