

# PLUMBING APPLICATION HHE-211

Maine CDC Drinking Water Program / Subsurface Wastewater

| PROPERTY ADDRESS  |  |  |  | ISSUING MUNICIPAL OFFICE   |  |  |  |
|---|--|--|--|--|--|--|--|
| Street / Subdivision Lot #  |  |  |  | Town / City  |  |  |  |
| PROPERTY OWNER INFORMATION  |  |  |  | Permit #   |  | Total Fee  |  |
| Name (Last, First)  |  |  |  | Date Issued  |  | Double Fee <input type="checkbox"/> <input type="checkbox"/> |  |
| Applicant Name (Last, First)  |  |  |  |  |  |  |  |
| OWNER/APPLICANT CONTACT INFORMATION   |  |  |  | Local Plumbing Inspector Signature   |  |  |  |
| Street  |  |  |  | License #  |  |  |  |
| City  |  |  |  | FEE State \$   |  | Local \$   |  |
| State Zip Code Phone  |  |  |  | LOCATION Map #   |  | Lot #  |  |
| Email   |  |  |  | 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><br>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)  |  |
| Copy: 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 Home <input type="checkbox"/>   |  | Mfd. Housing Rep. <input type="checkbox"/> License # <input type="text"/> |  |
| HUD Homes (permanent frame) <input type="checkbox"/> |  | New <input type="checkbox"/> Used <input type="checkbox"/> Mobile Home <input type="checkbox"/> |  | Property Owner <input type="checkbox"/>                                   |  |
| Certified Modular Home <input type="checkbox"/>      |  | Multiple Family Dwelling <input type="checkbox"/>   |  |   |  |
|  |  | Other (specify below) <input type="text"/>  |  |   |  |

| Column 1 – Hook-Up & Relocation   | Column 2 – Fixtures              |            | Column 3 – Fixtures    |            | <b>State of Maine</b><br>Department of Health and Human Services/<br>Center for Disease Control and Prevention<br><br>Environmental & Community Health •<br>Drinking Water Program •<br>Subsurface Wastewater<br><br>286 Water Street<br>State House Station 11<br>Augusta, ME 04333<br>207-287-2070<br><br><b>HHE-211</b><br>Revised by LAC<br>5/1/2024 |
|---|----------------------------------|------------|------------------------|------------|--|
| <b>Maximum 1 Hook-Up</b>  | <b>Type of Fixture</b>           | <b>Qty</b> | <b>Type of Fixture</b> | <b>Qty</b> |  |
| Hook-Up (a) <input type="checkbox"/><br><i>Hook-up to public sewer in those cases where the connection is not regulated and inspected by the local sanitary district.</i> | Treatment Softener, Filter, etc. |            | Bathtub (and Shower)   |            |  |
|   | Hosebib/Sillcock                 |            | Shower (Separate)      |            |  |
|   | Floor Drain                      |            | Sink                   |            |  |
|   | Urinal                           |            | Wash Basin             |            |  |
| Hook-Up (b) <input type="checkbox"/><br><i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>  | Drinking Fountain                |            | Water Closet (Toilet)  |            |  |
|   | Indirect Waste                   |            | Clothes Washer         |            |  |
|   | Grease/Oil Separator             |            | Dishwasher             |            |  |
| Piping Relocation <input type="checkbox"/><br><i>Relocation of sanitary lines, drains, and piping without new fixtures within the structure.</i>                          | Roof Drain                       |            | Garbage Disposal       |            |  |
|   | Bidet                            |            | Laundry Tub            |            |  |
|   | Other: <input type="text"/>      |            | Water Heater           |            |  |

Total Column 1  + Total Column 2  + Total Column 3  = Enter Total Fixtures / Hook-Ups Below

|   |                                  |          |
|---|----------------------------------|----------|
| PERMIT TRANSFER ONLY <input type="checkbox"/> \$10.00 | <b>Total Fixtures / Hook-Ups</b> | (min. 4) |
|   | <b>Per-Fixture Fee</b>           |          |
|   | <b>TOTAL PERMIT FEE</b>          |          |