PLUMBING APPLICATION			Department of Health and Human Services			
PROPERTY ADDRESS			Division of Environmental Health			
Town or			Town/City Permit #			
Plantation Street or			Date Permit Issued// Fee: \$ Double Fee Charged []			
Subdivision Lot #						
PROPERTY OWNER(S) NAME			L.P.I. # Local Plumbing Inspector Signature Fee: \$ State min_fee \$ Locally adopted fee			
Last. First.		Fee: \$ State min. fee \$ Locally adopted fee Copy: [] Owner [] Town [] State Map # Lot # Local				
Last: First: Applicant						
Name:		The Internal Plumbing Fixtures and Piping shall not be installed until a				
Mailing Address of Owner/Applicant		Permit is issued by the L	ocal Plur	mbing Inspector. The Permit shall install the plumbing system in		
(if Different)			accordance with this app	olication a	and the Maine Subsurface Wastewater	
Owner/Applicant Stateme		Disposal Rules.				
I certify that the information submitted is correct to the best of my			Continue Inspection Required			
knowledge and understand that any falsification is reason for the			Caution: Inspection Required			
Local Plumbing Inspector(s) to deny a permit.			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			Date Approved (Rough-in)			
- "		LPI Signature	Date Approved (Final)			
PERMIT INFORMATI						
This Application is for	T	Type of Structure to be Served			Plumbing to be Installed by:	
1. NEW PLUMBING	1. SINGLE FAMILY RESIDENCE			1. 🗆 I	1. MASTER PLUMBER	
2. RELOCATED PLUMBING	2. MODULAR OR MOBILE HOME			2. OIL BURNERMAN		
				2 🗆 1	3. MFG'D HOUSING DEALER / MECHANIC	
	3. MULTIPLE FAMILY DWELLING			3. E MI OB HOOGING BEALER/ MEGNANIO		
	4. OTHER-SPECIFY			4. 🗆 I	4. ☐ PUBLIC UTILITY EMPLOYEE	
				5. PROPERTY OWNER		
				LICENCE #1		
				LICENSE # _ _ _ _		
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture			Numbe	Column 1 r Type of Fixture	
HOOK-UP: to public sewer by		1	Hosebib / Sillcock		Bathtub (and Shower)	
those cases where the connection		Floor Drain			_ Shower (separate)	
is not regulated and inspected by		Urinal			Sink	
the local sanitary district.	<u> </u>	Drinking Fountain		_ _ _	_ Wash Basin	
	<u> </u>	Indirect Wa	aste	<u> </u>	Water Closet (Toilet)	
HOOK-UP: to an existing subsurface		1	atment Softener, Filter, Etc.	_ _	_ Clothes Washer	
wastewater disposal system		<u> </u>	il Separator	<u> </u>	_ Dish Washer	
		Roof Drain			_ Garbage Disposal	
PIPING RELOCATION: of sanitary	<u> </u>	Bidet		 	Laundry Tub	
lines, drains, and piping without new fixtures.		Other:	- L141-D O-L O		Water Heater	
HOW HARMICO.		. Fixtures (S	ubtotal) Column 2		Fixtures (Subtotal) Column 1 Fixtures (Subtotal) Column 2	
OR					TOTAL FIXTURES	
OK .						
☐ TRANSFER FEE					Fixture Fee	
[\$10.00]		SEE DEE	RMIT FEE SCHEDULE	I	Transfer Fee	
			ALCULATING FEE		Hook-Up & Relocation Fee	
					PERMIT FEE (TOTAL)	
	Own	vn Copy State Copy	PAGE 1 OF 1			
	İ				HHE-211 Rev. 05/2015	