

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			
Applicant Name (Last, First)										
OWNER/APPLICANT CONTACT INFORMATION					Local Plumbing Inspector Signature License #					
Street					FEES State		\$	Local		\$
City					LOCATION Map #			Lot #		
State		Zip Code		Phone		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.				
Email										
OWNER/APPLICANT STATEMENT					CAUTION: INSPECTION REQUIRED					
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.					I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.					
Owner/Applicant Signature					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:		
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"/>		Mfd. Housing Rep. <input type="checkbox"/> License # <input type="text"/>		
HUD Homes (permanent frame) <input type="checkbox"/>		Multiple Family Dwelling <input type="checkbox"/>		Property Owner <input type="checkbox"/>		
Certified Modular Home <input type="checkbox"/>		Other (specify below) <input type="text"/>				
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 • Drinking Water Program • Subsurface Wastewater 286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070 HHE-211 Revised 3/7/2024	
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>	Treatment Softener, Filter, etc.		Bathtub (and Shower)			
	Hosebib/Sillcock		Shower (Separate)			
	Floor Drain		Sink			
	Urinal		Wash Basin			
Hook-Up (b) <input type="checkbox"/> <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"/> <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 <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	
					ADMINISTRATION FEE	\$ 20.00
					TOTAL PERMIT FEE	\$ <input type="text"/>