

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			
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.				CAUTION: INSPECTION REQUIRED 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"/>				<input type="text"/> 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	License # <input type="text"/>
Relocated Plumbing	<input type="checkbox"/>	Modular or Mobile Home	<input type="checkbox"/>	Mfd. Housing Rep.	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.	<input type="text"/>	Bathtub (and Shower)	<input type="text"/>	
	Hosebib/Sillcock	<input type="text"/>	Shower (Separate)	<input type="text"/>	
	Floor Drain	<input type="text"/>	Sink	<input type="text"/>	
	Urinal	<input type="text"/>	Wash Basin	<input type="text"/>	
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>	Drinking Fountain	<input type="text"/>	Water Closet (Toilet)	<input type="text"/>	
	Indirect Waste	<input type="text"/>	Clothes Washer	<input type="text"/>	
	Grease/Oil Separator	<input type="text"/>	Dishwasher	<input type="text"/>	
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures within the structure.</i>	Roof Drain	<input type="text"/>	Garbage Disposal	<input type="text"/>	
	Bidet	<input type="text"/>	Laundry Tub	<input type="text"/>	
	Other: <input type="text"/>	<input type="text"/>	Water Heater	<input type="text"/>	

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

PERMIT TRANSFER ONLY <input type="checkbox"/> \$10.00	Total Fixtures / Hook-Ups	<input type="text"/>
	Per-Fixture Fee	\$ <input type="text"/>
	TOTAL PERMIT FEE	\$ <input type="text"/>