

# 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				FEEES		State \$	
City				LOCATION		Map #	
State		Zip Code		Phone		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> 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					
<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 #	
Relocated Plumbing <input type="checkbox"/>		Modular or Mobile Home <input type="checkbox"/>		'Mfd. Housing Rep. <input type="checkbox"/> License #	
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="checkbox"/>			

Column 1 – Hook-Up & Relocation	Column 2 – Fixtures		Column 3 – Fixtures		<b>State of Maine</b> 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  <b>HHE-211</b> 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:		Water Heater		

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

<b>PERMIT TRANSFER ONLY</b> <input type="checkbox"/> \$10.00	Total Fixtures / Hook-Ups	0
	Per-Fixture Fee	\$
	<b>TOTAL PERMIT FEE</b>	<b>\$ 0.00</b>

Applicant E-Mail Address: \_\_\_\_\_ Applicant Phone Number: \_\_\_\_\_