

| 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 Town State                                                                                                                                                       |  |  |  |  | Date (Final)                                                                                                                                                                                                                                                                             |  |            |       |    |

| PERMIT INFORMATION                                                                                                                               |  |                                  |     |                              |           |                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------|-----|------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| This application is for:                                                                                                                         |  | Type of structure to be served:  |     | Plumbing to be installed by: |           |                                                                                                                                                                                                                                                                                                                                                                       |
| New Plumbing                                                                                                                                     |  | Single Family Residence          |     | Master Plumber               | License # |                                                                                                                                                                                                                                                                                                                                                                       |
| Relocated Plumbing                                                                                                                               |  | Modular or Mobile Home           |     | Mfd. Housing Rep.            | License # |                                                                                                                                                                                                                                                                                                                                                                       |
| HUD Homes (permanent frame)                                                                                                                      |  | Multiple Family Dwelling         |     | Property Owner               |           |                                                                                                                                                                                                                                                                                                                                                                       |
| Certified Modular Home                                                                                                                           |  | Other (specify below)            |     |                              |           |                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                  |  |                                  |     |                              |           |                                                                                                                                                                                                                                                                                                                                                                       |
| Column 1 – Hook-Up & Relocation                                                                                                                  |  | Column 2 – Fixtures              |     | Column 3 – Fixtures          |           | <div>State of Maine</div> <div>Department of Health and Human Services/ Center for Disease Control and Prevention</div> <div>Environmental &amp; Community Health • Drinking Water Program • Subsurface Wastewater</div> <div>286 Water Street<br/>State House Station 11<br/>Augusta, ME 04333<br/>207-287-2070</div> <div>HHE-211</div> <div>Revised 3/7/2024</div> |
| Maximum 1 Hook-Up                                                                                                                                |  | Type of Fixture                  | Qty | Type of Fixture              | Qty       |                                                                                                                                                                                                                                                                                                                                                                       |
| Hook-Up (a)<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)<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<br><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                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                  |  |                                  |     |                              |           |                                                                                                                                                                                                                                                                                                                                                                       |
| PERMIT TRANSFER ONLY \$10.00                                                                                                                     |  |                                  |     |                              |           | Total Fixtures / Hook-Ups                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                  |  |                                  |     |                              |           | Per-Fixture Fee                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                  |  |                                  |     |                              |           | TOTAL PERMIT FEE                                                                                                                                                                                                                                                                                                                                                      |