

PLUMBING APPLICATION

Maine DHHS/CDC – Division of Environmental & Community Health

PROPERTY ADDRESS				ISSUING MUNICIPAL OFFICE			
City, Town, or Plantation				Town/City	BRUNSWICK		
Street/Subdivision Lot #				Permit #		Total Fee	\$
PROPERTY OWNER INFORMATION				Date Issued		Double Fee	
Name (Last, First)				Local Plumbing Inspector Signature		License #	
Applicant Name (Last, First)							
OWNER/APPLICANT MAILING ADDRESS				FEES	State	\$	Local
Street				LOCATION	Map #		Lot #
City				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.			
State		Zip Code					
OWNER/APPLICANT STATEMENT				<p style="text-align: center;">CAUTION: INSPECTION REQUIRED</p> <p style="text-align: center;">I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p>			
<p style="background-color: yellow;">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.</p>							
Signature of Owner/Applicant		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 #	
Relocated Plumbing	<input type="checkbox"/>	Modular or Mobile Home	<input type="checkbox"/>	Oil Burner Installer	<input type="checkbox"/>	License #	
		Multiple Family Dwelling	<input type="checkbox"/>	Mfd. Housing Rep.	<input type="checkbox"/>	License #	
		Other (specify below)	<input type="checkbox"/>	Public Utility Rep.	<input type="checkbox"/>	License #	
				Property Owner	<input type="checkbox"/>		

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 – Subsurface Wastewater 286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070 HHE-211 Revised 7/24/2018
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>	Hosebib/Sillcock		Bathtub (and Shower)		
	Floor Drain		Shower (Separate)		
	Urinal		Sink		
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to an existing subsurface wastewater disposal system.</i>	Drinking Fountain		Wash Basin		
	Indirect Waste		Water Closet (Toilet)		
	Treatment Softener, Filter, etc.		Clothes Washer		
	Grease/Oil Separator		Dishwasher		
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</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	<input type="checkbox"/>	\$12.00	Total Fixtures / Hook-Ups	
MINIMUM PERMIT FEE		\$60.00	Per-Fixture Fee	\$ 12.00
			TOTAL PERMIT FEE	\$