

PLUMBING APPLICATION HHE-211

Maine CDC Drinking Water Program / Subsurface Wastewater

PROPERTY ADDRESS				ISSUING MUNICIPAL OFFICE			
Street / Subdivision Lot #				Town / City		Lowell	
PROPERTY OWNER INFORMATION				Permit #		Total Fee \$	
Name (Last, First)				Date Issued		Double Fee	
Applicant Name (Last, First)				Local Plumbing Inspector Signature License #			
OWNER/APPLICANT CONTACT INFORMATION				FEES		State \$	
Street				Local		\$	
City				LOCATION		Map #	
State				Lot #			
Zip Code				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.			
Phone							
Email				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"/>		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	
Maximum 1 Hook-Up		Type of Fixture		Type of Fixture	
		Qty		Qty	
Hook-Up (a) <input type="checkbox"/>		Treatment Softener, Filter, etc.		Bathtub (and Shower)	
<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		Shower (Separate)	
		Floor Drain		Sink	
		Urinal		Wash Basin	
Hook-Up (b) <input type="checkbox"/>		Drinking Fountain		Water Closet (Toilet)	
<i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>		Indirect Waste		Clothes Washer	
		Grease/Oil Separator		Dishwasher	
Piping Relocation <input type="checkbox"/>		Roof Drain		Garbage Disposal	
<i>Relocation of sanitary lines, drains, and piping without new fixtures within the structure.</i>		Bidet		Laundry Tub	
		Other: <input type="text"/>		Water Heater	

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

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			
											Per-Fixture Fee		\$	
											TOTAL PERMIT FEE		\$	