

# PLUMBING APPLICATION

Maine DHHS/CDC – Division of Environmental & Community Health

PROPERTY ADDRESS				ISSUING MUNICIPAL OFFICE			
City, Town, or Plantation		Lamoine		Town/City		Lamoine	
Street/Subdivision Lot #		LYDIAS LANE		Permit #		1941	
				Total Fee		\$ 140	
PROPERTY OWNER INFORMATION				Date Issued		Double Fee	
Name (Last, First)		Sanborn		1/22/19			
Applicant Name (Last, First)		Reginald		Local Plumbing Inspector Signature		License #	
				[Signature]		394	
OWNER/APPLICANT MAILING ADDRESS				FEES		State \$	
Street		132 Lydias Lane		Local \$			
City		Lamoine		LOCATION		Map # 5	
State		ME		Lot #		14-A-23	
Zip Code		04605		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.			
Signature of Owner/Applicant		Date					
[Signature]		7-15-19		LPI Signature		Date (Rough-In)	
Copy: Property Owner <input checked="" 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 checked="" type="checkbox"/>	Single Family Residence <input checked="" 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 checked="" 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 – 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	2	Bathtub (and Shower)	2	
	Floor Drain	1	Shower (Separate)	1	
	Urinal	0	Sink	1	
	Drinking Fountain	0	Wash Basin	2	
Hook-Up (b) <input checked="" type="checkbox"/> <i>Hook-up to an existing subsurface wastewater disposal system.</i>	Indirect Waste	0	Water Closet (Toilet)	2	
	Treatment Softener, Filter, etc.	1/A	Clothes Washer	1	
	Grease/Oil Separator	0	Dishwasher	1	
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>	Roof Drain	0	Garbage Disposal	0	
	Bidet	0	Laundry Tub	0	
	Other:		Water Heater	0	

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	131?
	Per-Fixture Fee	\$	10
	<b>TOTAL PERMIT FEE</b>	\$	140