

# 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 #	1140 Shore Road		Permit #	1967	Total Fee \$ 120
PROPERTY OWNER INFORMATION			Date Issued	8/14/2019	Double Fee
Name (Last, First)	SWINNEY Meryl		Local Plumbing Inspector Signature	[Signature] # 394	
Applicant Name (Last, First)	GRAVES P + A		License #		
OWNER/APPLICANT MAILING ADDRESS			FEES	State \$ 30	Local \$ 90
Street	35 SYLVAN ROAD P.O. Box 950		LOCATION	Map # 1	Lot # 7
City	North East Harbor		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	ME	Zip Code	04662		
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.		
[Signature]		Date	[Signature]		Date (Rough-In)
Signature of Owner/Applicant		8-13-19	LPI Signature		
Copy: Property Owner <input type="checkbox"/> Town <input type="checkbox"/> State <input checked="" 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 checked="" type="checkbox"/> License # 02534
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	2	Bathub (and Shower)	1	
	Floor Drain		Shower (Separate)	1	
	Urinal		Sink	1	
	Drinking Fountain		Wash Basin	2	
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to an existing subsurface wastewater disposal system.</i>	Indirect Waste		Water Closet (Toilet)	2	
	Treatment Softener, Filter, etc.		Clothes Washer	1	
	Grease/Oil Separator		Dishwasher	1	
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	1	

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

PERMIT TRANSFER ONLY <input type="checkbox"/> \$10.00	Total Fixtures / Hook-Ups	12
	Per-Fixture Fee	10.00
	<b>TOTAL PERMIT FEE</b>	<b>120.00</b>