

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or
Plantation
Street or
Subdivision Lot #

PROPERTY OWNER(S) NAME

Last: _____ First: _____

Applicant
Name:

Mailing Address of
Owner/Applicant
(if Different)

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.

Signature of Owner/Applicant _____

Date _____

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City _____ Permit # _____

Date Permit Issued ___/___/___ Fee: \$ _____ Double Fee Charged []

L.P.I. # _____

Local Plumbing Inspector Signature

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

LPI Signature _____

Date Approved _____

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Date Approved (Rough-In) _____

Local Plumbing Inspector Signature _____

Date Approved (Final) _____

PERMIT INFORMATION

This Application is for

Type of Structure to be Served

Plumbing to be Installed by:

1. NEW PLUMBING
2. RELOCATED PLUMBING

1. SINGLE FAMILY RESIDENCE
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER-SPECIFY _____

1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER / MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # | | | | | | | | | | | | | | | |

Hook-Up & Piping Relocation
Maximum of 1 Hook-Up

Column 2
Number Type of Fixture

Column 1
Number Type of Fixture

HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	Hosebib / Sillcock Floor Drain Urinal Drinking Fountain Indirect Waste	Bathtub (and Shower) Shower (separate) Sink Wash Basin Water Closet (Toilet)
HOOK-UP: to an existing subsurface wastewater disposal system	Water Treatment Softener, Filter, Etc. Grease / Oil Separator Roof Drain	Clothes Washer Dish Washer Garbage Disposal
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Bidet Other: _____ Fixtures (Subtotal) Column 2	Laundry Tub Water Heater Fixtures (Subtotal) Column 1 Fixtures (Subtotal) Column 2

OR

TRANSFER FEE
[\$10.00]

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE

TOTAL FIXTURES

| | | | Fixture Fee
| | | | Transfer Fee

| | | | Hook-Up & Relocation Fee

PERMIT FEE (TOTAL)

Owner Town Copy State Copy