Department of Human Sciences Division of Health Engineering PLUMBING APPLICATION PROPERTY ADDRESS Town or Plantation Street Subdivision Lot # PROPERTY OWNERS NAME Applicant Name: Mailing Address of Owner/Applicant (If Different) Caution: Inspection Required **Owner/Applicant Statement** I have inspected the installation authorized above and found it to be in I certify that the information submitted is correct to the best of my compliance with the Maine Plumbing Rules. knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit. Date Approved Local Plumbing Inspector Signature Signature of Owner/Applicant Date PERMIT INFORMATION Type of Structure To Be Served: Plumbing To Be Installed By: This Application is for 1. MASTER PLUMBER 1. □ NEW PLUMBING 1 SINGLE FAMILY DWELLING 2. OIL BURNERMAN 2. MODULAR OR MOBILE HOME 2. RELOCATED PLUMBING ☐ MFG'D. HOUSING DEALER/MECHANIC 3. MULTIPLE FAMILY DWELLING 4. PUBLIC UTILITY EMPLOYEE 4. ☐ OTHER - SPECIFY 5. PROPERTY OWNER LICENSE # | O, S, / 8 Column 2 Column 1 Hook-Up & Piping Relocation Type of Fixture Maximum of 1 Hook-Up Type of Fixture Number Number Bathtub (and Shower) Hosebibb / Sillcock HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by Shower (Separate) Floor Drain the local Sanitary District. Sink Urinal Wash Basin **Drinking Fountain** HOOK-UP: to an existing subsurface wastewater disposal system. Water Closet (Toilet) Indirect Waste PIPING RELOCATION: of sanitary Clothes Washer Water Treatment Softener, Filter, etc. lines, drains, and piping without new fixtures. Dish Washer Grease / Oil Separator Garbage Disposal **Dental Cuspidor** Laundry Tub Bidet ORWater Heater Other: TRANSFER FEE Fixtures (Subtotal) Fixtures (Subtotal) L [\$6.00]Column 2 Column 1 Fixtures (Subtotal) Column 2

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SEE PERMIT FEE SCHEDULE

FOR CALCULATING FEE

Hook-Up & Relocation Fee Permit Fee (Total)

Total Fixtures

Fixture Fee Transfer Fee