

PLUMBING APPLICATION

Department of Human Services
 Division of Health Engineering
 (707) 289-3826

PROPERTY ADDRESS

Town Or
 Plantation _____
 Street _____
 Subdivision/Lot # _____

PROPERTY OWNERS NAME

Last _____
 Applicant Name _____
 Mailing Address of
 Owner/Applicant
 (if Different) _____

PERMIT # _____

[Signature]

PLUMBING INSPECTOR

\$ _____ FEE

C.P.I. # _____

Owner Application Date _____

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

Signature of Owner/Applicant _____ Date _____
 Signature of Plumbing Inspector _____ Date _____

PERMIT INFORMATION

This Application is for: 1 NEW PLUMBING 2 RELOCATED PLUMBING

Type Of Structure To Be Served:
 1 SINGLE FAMILY DWELLING
 2 MODULAR OR MOBILE HOME
 3 MULTIPLE FAMILY DWELLING
 4 OTHER - SPECIFY _____

Plumbing To Be Installed By:
 1 MASTER PLUMBER
 2 OIL HEATER
 3 WFGD HOLDING DEALER MECHANIC
 4 PUBLIC UTILITY EMPLOYEE
 5 PROPERTY OWNER

LICENSE # _____

FEB 10 1985

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type Of Fixture	Number	Column 1 Type Of Fixture
	HOOK-UP to public sewer in those cases where the connection is regulated and inspected by the local Sanitary District		Hose/bb Silcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK-UP to an existing subsurface wastewater disposal system		Drinking Fountain		Wash Basin
			Indirect Waste		Wash Basin (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
	PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures.		Grease Oil Separator		Dish Washer
			Dental Cup		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other: _____		Water Heater
\$	Hook-Up Fee		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
PERMIT FEE SCHEDULE OR CALCULATING FEE					Fixtures (Subtotal) Column 2
					Total Fixtures
				\$	Fixture Fee
				\$	Hook-Up Fee
\$			Permit Fee (Total)	\$	

