

# PLUMBING APPLICATION HHE-211

Maine CDC Drinking Water Program / Subsurface Wastewater

PROPERTY ADDRESS				ISSUING MUNICIPAL OFFICE			
City, Town, or Plantation				Town/City	Arrowsic		
Street/Subdivision Lot #				Permit #		Total Fee	\$
PROPERTY OWNER INFORMATION				Date Issued		Double Fee	
Name (Last, First)				Local Plumbing Inspector Signature		License #	
Applicant Name (Last, First)							
OWNER/APPLICANT MAILING ADDRESS				FEES	State	\$	Local
Street				LOCATION	Map #		Lot #
City				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		Zip Code					
OWNER/APPLICANT STATEMENT				<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.			
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		LPI Signature		Date (Rough-In)	
<b>Copy:</b>		Property Owner	<input type="checkbox"/>	Town	<input type="checkbox"/>	State	<input type="checkbox"/>
						Date (Final)	

PERMIT INFORMATION					
<b>This application is for:</b>		<b>Type of structure to be served:</b>		<b>Plumbing to be installed by:</b>	
New Plumbing	<input type="checkbox"/>	Single Family Residence	<input type="checkbox"/>	Master Plumber	License # <input type="text"/>
Relocated Plumbing	<input type="checkbox"/>	Modular or Mobile Home	<input type="checkbox"/>	Mfd. Housing Rep.	License # <input type="text"/>
HUD Homes (permanent frame)	<input type="checkbox"/>	Multiple Family Dwelling	<input type="checkbox"/>	Property Owner	<input type="checkbox"/>
Certified Modular Home	<input type="checkbox"/>	Other (specify below)	<input type="text"/>		

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 • Drinking Water Program • Subsurface Wastewater  286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070  <b>HHE-211</b> Revised 2/22/2024
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	<input type="text"/>	Bathtub (and Shower)	<input type="text"/>	
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>	Floor Drain	<input type="text"/>	Shower (Separate)	<input type="text"/>	
	Urinal	<input type="text"/>	Sink	<input type="text"/>	
	Drinking Fountain	<input type="text"/>	Wash Basin	<input type="text"/>	
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures within the structure.</i>	Indirect Waste	<input type="text"/>	Water Closet (Toilet)	<input type="text"/>	
	Treatment Softener, Filter, etc.	<input type="text"/>	Clothes Washer	<input type="text"/>	
	Grease/Oil Separator	<input type="text"/>	Dishwasher	<input type="text"/>	
	Roof Drain	<input type="text"/>	Garbage Disposal	<input type="text"/>	
	Bidet	<input type="text"/>	Laundry Tub	<input type="text"/>	
	Other: <input type="text"/>	<input type="text"/>	Water Heater	<input type="text"/>	

Total Column 1 <input type="text"/>	+	Total Column 2 <input type="text"/>	+	Total Column 3 <input type="text"/>	=	Enter Total Fixtures / Hook-Ups Below
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<b>PERMIT TRANSFER ONLY</b> <input type="checkbox"/> \$10.00	<b>Total Fixtures / Hook-Ups</b>	<input type="text"/>
	<b>Per-Fixture Fee</b>	\$ <input type="text"/>
	<b>TOTAL PERMIT FEE</b>	\$ <input type="text"/>