

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

## PROPERTY OWNERS 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 Inspectors to deny a Permit.

Signature of Owner/Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Caution: Permit Required

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

## Caution: Inspection Required

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

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

## 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 BURNERMAN
- 3.  MFG'D. HOUSING DEALER/MECHANIC
- 4.  PUBLIC UTILITY EMPLOYEE
- 5.  PROPERTY OWNER

LICENSE # \_\_\_\_\_

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

**HOOK-UP:** to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.

**OR**

**HOOK-UP:** to an existing subsurface wastewater disposal system.

**PIPING RELOCATION:** of sanitary lines, drains, and piping without new fixtures.

**OR**

TRANSFER FEE  
[\$6.00]

Number	Column 2 Type of Fixture
	Hosebib / Silcock
	Floor Drain
	Urinal
	Drinking Fountain
	Indirect Waste
	Water Treatment Softener, Filter, etc.
	Grease / Oil Separator
	Roof Drain
	Bidet
	Other: _____
	Fixtures (Subtotal) Column 2

Number	Column 1 Type of Fixture
	Bathtub (and Shower)
	Shower (Separate)
	Sink
	Wash Basin
	Water Closet (Toilet)
	Clothes Washer
	Dish Washer
	Garbage Disposal
	Laundry Tub
	Water Heater
	Fixtures (Subtotal) Column 1
	Fixtures (Subtotal) Column 2

SEE PERMIT FEE SCHEDULE  
FOR CALCULATING FEE

	<b>Total Fixtures</b>
	Fixture Fee
	Transfer Fee
	Hook-Up & Relocation Fee
	<b>Permit Fee (Total)</b>