

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation
Street or Subdivision Lot #

Town/City Freeport Permit # _____

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

PROPERTY OWNER(S) NAME

Last: _____ First: _____

Local Plumbing Inspector Signature _____ L.P.I. # _____

Fee: \$ _____ State min. fee \$ _____ Locally adopted fee

Copy: [] Owner [] Town [] State Map # _____ Lot # _____ Local

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 _____

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 Subsurface Wastewater Disposal Rules.

Caution: Inspection Required

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

_____ Date Approved (Rough-in)

_____ LPI 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

HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

HOOK-UP: to an existing subsurface wastewater disposal system

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

Column 2 Number Type of Fixture

Hosebib / Sillcock
 Floor Drain
 Urinal
 Drinking Fountain
 Indirect Waste

Water Treatment Softener, Filter, Etc.
 Grease / Oil Separator
 Roof Drain

Bidet
 Other: _____
 Fixtures (Subtotal) Column 2

Column 1 Number 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

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