

PLUMBING APPLICATION

Map _____ Lot _____ BP# _____

PROPERTY ADDRESS

Town of Wells
Street or
Subdivision Lot#

Plumbing Company Name: _____

Plumbers Name: _____

PROPERTY OWNER'S NAME

Street Address: _____

Last: _____ First: _____

Town/City: _____ State: _____ Zip: _____

Mailing Address:

Plumber's Telephone#: _____

Town/City: _____ State: _____ Zip: _____

Plumber's Email Address: _____

Owner's Telephone# _____

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 authorize above and found it to be in compliance with Maine Plumbing Rules.

CAUTION: INSPECTION REQUIRED

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

LPI Signature

Date (Rough-In)

Date (Final)

PERMIT INFORMATION

This Application is for

1. NEW INTERNAL PLUMBING
2. RELOCATED INTERNAL PLUMBING

Type of Structure Served:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. SEASONAL UNIT
4. MULTIPLE FAMILY DWELLING
5. OTHER - SPECIFY _____
6. COMMERCIAL
7. HOTEL/MOTEL
8. DUPLEX

Plumbing To Be Installed By:

Plumbing To Be Installed By:	LICENSE #
MASTER PLUMBER	
OIL BURNER MAN	
MID HOUSING REP	
PUBLIC UTILITY REP	
PROPERTY OWNER	

Column 1 - Hook-Up & Relocation	Column 2 - Fixtures		Column 3 - Fixtures		State of Maine Department of Health and Human Services/ Center for Disease Control and Prevention Environmental & Community Health - Subsurface Wastewater 286 Water Street State House Station 11 Augusta, ME 04333 207-287-2070 HHE-211
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>	Hose/bibb / Sillcock		Bathtub (and Shower)		
Hook-Up (b) <input type="checkbox"/> <i>Hook-up to a newly permitted or existing subsurface wastewater disposal system.</i>	Trap Primer / Floor Drain		Shower (Separate)		
	Urinal		Sink		
	Drinking Fountain		Wash Basin		
Piping Relocation <input type="checkbox"/> <i>Relocation of sanitary lines, drains, and piping without new fixtures.</i>	Indirect Waste		Water Closet (Toilet)		
	Treatment Softener, Filter, etc.		Clothes Washer		
	Grease/Oil Separator		Dishwasher		
	Roof Drain		Garbage Disposal		
	Irrigation System		Laundry Tub		
	Other:		Water Heater		

Total Column 1 + Total Column 2 + Total Column 3 = Enter Total Fixtures / Hook-Ups Below

PERMIT TRANSFER ONLY

\$10.00

MINIMUM FEE FOR A PLUMBING PERMIT IS \$60.00

Total Fixtures - Column 1, 2 & 3	
X's \$10.00 per Fixture	
Processing Fee	\$20.00
Total Due	