PROPERTY ADDRESS						ISSUING M	UNICIPAL	OFFICE			
City, T	own, or Plantation				Town/City						
Street/Subdivision Lot#					Permit #		T	otal Fee	2		
PROPERTY OWN		VNER INFO	RMATION		Date Issued			Double	<u> </u>		
Name (Last, First)							<u> </u>	Double	ree		
Applicant I	Name (Last, First)				Local Plumbir	ng Inspector S	Signature		Licens	e#	
	OWNER/APPLICA	NT MAILING	ADDRESS			state \$		Local	•		
Street					LOCATION			Local	Þ		
City						Map #		Lot#			
State Zip Code			is	Internal plumbing fixtures and piping may not be installed until a permit issued by the Local Plumbing Inspector. The permit authorizes the own or installer to install the plumbing system in accordance with this							
	OWNER/APPL				application and						
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.					CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be i compliance with the Maine Plumbing Rules Application.						
Signature of Owner/Applicant Date					LPI Signature Date (Rough					ab la\	
Copy: Property Owner Town									Date (Rough-In)		
					State					nol\	
			DEDMIT	IFORM					Date (Fi	iai)	
This appli	ication is for:	Type	F structure to be seen		ATION						
New Plumbing			of structure to be served		Plumbing to be installed by:						
Relocated Plumbing			Single Family Residence Modular or Mobile Home Multiple Family Dwelling Other (specify below) Master Plumber Oil Burner Installer Mfd. Housing Rep. Public Utility Rep.		Oil Burner Installer Lie Mfd. Housing Rep. Lie		License :	ense #			
							License #				
		IV					License #				
					y Rep.	License #	¥				
Column 1 – Ho	ook-Up & Relocation				Property	Owner		•			
Maximum 1 Hook-Up		A SECTION ASSESSMENT OF THE PARTY OF THE PAR	Column 2 - Fixtures		Column	3 – Fixtures					
look-Up (a) look-up to public sewer in those cases there the connection is not regulated and spected by the local sanitary district.			ype of Fixture	Qty	Type of F	ixture	Qty	State of Maine		ine	
			Hosebib/Sillcock		Bathtub (and Shower)			Department of Health an Human Services/ Center for Disease Contr			
		d -	Floor Drain		Shower (Separate)		C				
			Urinal		Sink				Prevention		
			Drinking Fountain		Wash Basin		1	Commi	onmenta unity Hea	lth -	
	V permitted or evicting		Indirect Waste		Water Closet (Toilet)				ice Waste		
look-up to a newly permitted or existing ubsurface wastewater disposal system.		Treatme	Treatment Softener, Filter, etc.		Clothes Washer			286 V State Ho	Vater Stre	et on 11	
	ping Relocation		Grease/Oil Separator		Dishwasher			August	ta, ME 04:	333	
oing Relocation	elocation of sanitary lines, drains,		Roof Drain		Garbage Disposal				-287-2070		
	any lines ducin-		Bidet		Laundry Tub			HHE-211 Revised 7/24/2018			
location of sanita	ary lines, drains, new fixtures.				W	ater Heater					
location of sanita	ary lines, drains, new fixtures.	Other:				arei Liearei					
oing Relocation location of sanita d piping without i	new fixtures.	Other:	Total Column 2			Column 3		Enter Hook	Total Fix	tures	
location of sanita d piping without I	mn 1 +					Column 3		Hook	Total Fix -Ups Belo	tures	
location of sanita d piping without I	mn 1 +	Other:				Column 3 Total Fixtu	res / Hook-L	Hook Ips	Total Fix	tures	