REPLACEMENT SEPTIC TANK (ONLY) APPLICATION Maine DHHS/CDC - Division of Environmental & Community Health																						
PROPERTY ADDRESS										ISSUING MUNICIPAL OFFICE												
	own, or	Plantation		Town/City																		
		Numbe	er & Street						Permit #			Date Issued										
PROPERTY OWNER/APPLICANT INFORMATION																			1. 1.			
Owner Name (Last, First)									Loca	umbing la	g Inspector Signature					License #						
Applicant Name (Last, First)								FEES	nimum	\$150.00			+ Local									
OWNER/APPLICANT MAILIN						DDRE	SS		Double Fee				_ = Total Fee			\$						
Street									Shares: State 255			% \$37.50			+ Local			s				
City						LOCA				ı	Ma	sp#				Lot	#					
State	ller.	Zip		Phone					ace was	wastewater disposal system may not be installed							led.					
LC	until a permit is issued by the Local Plumbing Inspector, The permit authorizes the owner or installer to install																					
Latitude: N Longitude								W	the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.													
2 535	Ties !	OW	NER/API	1	tne	maine S	ubsuma	ice vvi	astew	ater	· Dispos	sal R	ules.									
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector(s) to deny a permit.									CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application													
	nature	of Owner//	pplicant			Da	te	LPI Signature Di							Date							
		ORMATION				4145																
Septic Tank						isposal	Systen	n Serves	•			Type of Water Supply										
Replacement Tank Only							_	le Family [Drilled Well									
1. Concrete:								ber of Bed			Dug Well											
Regular Low Profile 2. Plastic:								iple Family			Other (Specify):											
Regular Low Profile								ber of Bed		Ι.												
3. Other (Specify):							3. Othe	er (Specify)	·					Water is supplied by								
(L					Private Water Supply Public Water System										
						arbage	Dispos	al Unit				Other (Specify):										
Tank Capacity							No				Onto (opecity).											
Gallons							Yes															
							If YES,	Specify:		-	IMPORTANT:											
Size of Property						Γ	Multi-Com	partment Tanl	artment Tank													
Sq. Feet						b. Tanks in a S			Series			This subsurface wastewater disposal system component permit application is intended for a										
Acres						Numb			ber of Tanks			single replacement tank only. Applications for all other disposal system configurations and com-										
						c. Increase Ta			ank Capacity		ponents must be completed on the standard HHE-200. This permit application should not be											
Shoreland Zoning						d. Filter on Tank Outlet					used in conjunction with a standard HHE-200; if a											
Yes No									 .	replacement tank is required as part of disposal system design, it must be incor							incorp	orated in				
						ffluent/i	_	Pump				a design detailed on a standard HHE-200.							-200.			
							Yes No			l Wa					For assistance, please contact the Subsurface Wastewater program: phone (207) 287-2070, email subsurface.wastewater@maine.gov.							