REPLACEMENT SEPTIC TANK (ONLY) APPLICATION							Maine DHHS/CDC – Division of Environmental & Community Health			
PROPERTY ADDRESS				ISSUING MUNICIPAL OFFICE						
City, Town, or Plantation				Town/City						
Number & Street				Permit #			Date Issued			
PROPERTY OWNE	INFORMATION	W SE B								
Owner Name (Last, First)				Local Plumbing Inspector Signature		gnature	License #			
Applicant Name (Last, First)				FEES	Minimum	\$150.00	+ Loca	a) \$		
OWNER/APPLICANT MAILING ADDRESS				Double F	ee 📗		= Total Fe	e \$		
Street				Shares:	State 25%	\$37.50	+ Loca	al \$		
City				LOCATION Map # Lot #						
State Zip	A subsurface wastewater disposal system may not be installed									
LOCATIONAL COORD	INATES - Deg	rees, Minutes, Secon	until a permit is issued by the Local Plumbing Inspector. The permit authorizes the owner or installer to install							
Latitude: N	e:	W	the disposal system in the Maine Subsur			n in accordance with this application and surface Wastewater Disposal Rules.				
OWNER/APPLICANT STATEMENT				CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application						
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.										
Signature of Owner	Date		LPI Signature			Date				
PERMIT INFORMATION										
Septic Tank	Disposal System			Type of Water Supply						
Replacement Tank Only	1. Single			Drilled Well						
1. Concrete:		Number of Bedr				Dug Well Other (Specify):				
Regular Low Profile 2. Plastic:		2. Multiple Family Number of Bedr				Other (Specily).				
Regular Low Profile		3. Other (Specify):				Water is supplied by				
3. Other (Specify):		J. Caron (Openny).				Private Water Supply				
		<u> </u>				Public Water System				
		Garbage Disposal Unit		·		Other (Specify):				
Tank Capacity		No No								
Gallons		Yes								
	If YES, Specify:			ĺ	IMPORTANT:		ANT:			
Size of Property	a. Multi-Compartment Tank b. Tanks in a Series Number of Tanks c. Increase Tank Capacity d. Filter on Tank Outlet			This subsurface wastewater disposal system component permit application is intended for a single replacement tank only. Applications for						
Sq. Feet										
Acres [ank Capacity		all other disposal system configurations and com- ponents must be completed on the standard HHE-200. This permit application should not be used in conjunction with a standard HHE-200; if a					
Shoreland Zoning										
Yes No				replacement tank is required as part of a larger disposal system design, it must be incorporated in						
			***		a design detailed on a standard HHE-200. For assistance, please contact the Subsurface					
	Yes									
	No					Wastewater program: phone (207) 287-2070, email subsurface.wastewater@maine.gov.				
						700				