

PLUMBING APPLICATION

Location of Job: _____ Plumbing Permit No: _____

Owner's Name: _____ Date: _____

Owner's Address: _____ Owner's Telephone: _____

Plumber's Name: _____

Plumber's Business Address: _____

Plumber's License _____ Home Telephone: _____ Business Telephone: _____

Job Description: _____

Tax Section

Block

Lot(s)

No. of Fixtures _____ Type of Occupancy _____

FIXTURES

LOCATION	B	1st	2nd	3rd	4th	5th
WATER CLOSETS						
LAUNDRY TUBS						
KITCHEN SINK						
LAVATORIES						
BATH TUBS						
URINALS						
SLOP SINKS						
SHOWERS						
INDIRECT WASTES						
DISH WASHERS						
OTHERS						

NO LEAD SOLDER FOR POTABLE WATER LINES

It shall be unlawful to extend or alter any existing plumbing or install any new plumbing or drainage work until a permit has been duly issued therefore and then only in conformance with the provisions of the Construction Code of the State of N.Y.

License No.

Name (Please Print)

Business Address

Signature

Master Plumber

Sworn to before me this day of..... 19.....

.....

Notary Public, Nassau Country, N.Y., No.....

DATE OF INSPECTION	RECORDS OF INSPECTIONS AND VIOLATIONS	INSPECTOR