

**TOWN OF BEDFORD
BUILDING AND CODE ENFORCEMENT
APPLICATION FOR PLUMBING PERMIT**



DATE ISSUED: ___/___/___

BUILDING PERMIT # _____

PERMIT FEE \$ _____ **\$75.00 for 1st 8 fixtures, \$7 each addition fixture**



STREET ADDRESS OF PROPERTY: _____

SECTION _____ BLOCK _____ LOT _____ ZONING _____

OWNER: _____ ADDRESS: _____

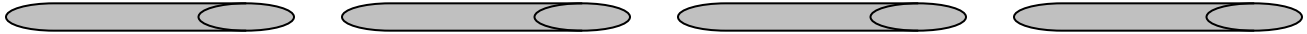
PHONE: _____

PLUMBER: _____ ADDRESS: _____

PHONE: _____

SIGNATURE OF APPLICANT: _____

APPLICATION IS HEREBY MADE FOR A PERMIT TO PERFORM THE WORK HEREIN SPECIFIED OR AS SHOWN ON THE DRAWINGS ACCOMPANYING THIS APPLICATION. IT IS DESIRED TO (ALTER/CONSTRUCT) THE PLUMBING IN THE (NEW/EXISTING) BUILDING. THE PROPOSED WORK OUTLINED ON THIS APPLICATION SHALL CONFORM TO ALL PROVISIONS OF THE NYS PLUMBING CODE.



THE NUMBER OF FIXTURES MUST ADHERE TO THE FOLLOWING SCHEDULE:

	Water Closet	Tubs	Shower	Basin	Sink	Slop Sinks	Wash Tubs	Hose Bibbs	Urinals	Floor Drain	Other
Exterior											
Basement											
1 st Story											
2 nd Story											
3 rd Story											

New Sprinkler System: _____ \$200 Fee Hot Water Heater: _____ \$50 Fee
 New Boiler: _____ \$50.00 Fee Gas Inspection: _____ \$50 Fee



TO BE COMPLETED BY THE PLUMBING INSPECTOR

COMMENTS: _____

I HAVE MADE A FINAL PLUMBING INSPECTION OF THE ABOVE CAPTIONED PREMISES AND FOUND THE PLUMBING SYSTEM TO BE IN COMPLIANCE WITH THE NYS PLUMBING CODE.

DATE

BUILDING INSPECTOR
(914) 666-8040

