

TOWN OF BEDFORD
BUILDING AND CODE ENFORCEMENT
APPLICATION FOR PLUMBING PERMIT



DATE ISSUED: ___/___/___

PERMIT FEE \$ _____

LICENSE # _____

Richard Megna
 Building Inspector

BUILDING
 PERMIT # _____

James Genovese
 Assistant Building Inspector

STREET ADDRESS OF PROPERTY: _____

SECTION _____ BLOCK _____ LOT _____ ZONING DISTRICT _____

OWNER: _____ ADDRESS: _____ PHONE: (____) ____ - ____

ZIP: _____

PLUMBER: _____ ADDRESS: _____ PHONE: (____) ____ - ____

ZIP: _____

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 TO BE INSTALLED MUST ADHERE TO THE FOLLOWING SCHEDULE:

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

New Sprinkler System: _____ NUMBER OF HEADS: _____

New Boiler: _____

SIGNATURE OF APPLICANT _____ DATE ___/___/___

TO BE COMPLETED BY THE PLUMBING INSPECTOR

ROUGH INSPECTION DATE: ___/___/___

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.

 PLUMBING INSPECTOR