

Permit Fee \$_____

Receipt/Check No. _____ Date _____

VILLAGE OF BRIARCLIFF MANOR
1111 PLEASANTVILLE ROAD
BRIARCLIFF MANOR, N.Y. 10510
PHONE) 914.944.2770 (FAX) 914.941.4837

Examined _____, 20____

Approved/Denied _____, 20____ Permit No. _____

(Building Inspector)



PLUMBING PERMIT APPLICATION

Date _____, 20____

The undersigned hereby makes application for a permit to perform the work shown on the drawings accompanying this application and description herein:

NUMBER AND STREET _____

SECTION _____ BLOCK _____ LOT _____ ZONE DISTRICT _____

OWNER _____

Email _____ Phone _____

NAME OF PLUMBER _____

Email _____ Phone _____

ADDRESS _____

WESTCHESTER COUNTY MASTER PLUMBER LICENSE NUMBER _____

TYPE OF WORK BE PERFORMED _____

Fixture Count

BASEMENT _____

1ST FLOOR _____

2ND FLOOR _____

3RD FLOOR _____

ABOVE _____

OTHER (GREASE TRAP, RPZ, ETC.) _____

Total Fixture Count _____

GAS CONNECTIONS _____

IF ADDITIONAL WORK HAS BEEN DONE, AND NOT INCLUDED ABOVE, THE CONTRACTOR UNDERSTANDS AND AGREES THAT HE MUST PAY THE FEE INVOLVED FOR SUCH WORK. A SEPARATE PERMIT SHALL BE REQUIRED FOR EACH BUILDING OR UNIT.

PRINT NAME _____

SIGNED _____