



PLUMBING PERMIT APPLICATION

Permit Application No.: _____

Permit No.: _____

Fee Paid: _____

Address of work _____, Port Washington

Section No. _____ Block No. _____ Lot No. _____

Property Owner

Licensed Plumber

Name _____

Name _____

Address _____

Company Name _____

Address _____

Email _____

Email _____

Tele No. _____

Tele. No. _____

Notorized Signature

Notorized Signature

Notary

Notary

Brief description of proposed work: _____

New Water Piping _____
 Gas piping _____
 Boiler _____ Gas _____ Oil _____
 Water Heater _____ Gas _____ Oil _____
 Sewer Connection _____
 New Water Service _____
 Grease Trap _____
 Indirect Waste _____
 Fresh Air Intake _____
 Fire Rated Enclosure _____

	Fixtures		
	Cellar	1 st fl.	2 nd fl.
Water Closets	_____	_____	_____
Urinals	_____	_____	_____
Wash sinks	_____	_____	_____
Bath tubs	_____	_____	_____
Wash tubs	_____	_____	_____
Sinks	_____	_____	_____
Stall showers	_____	_____	_____
Other	_____	_____	_____

Diagrams may be indicated on the back of this form