

JEFFREY M. LANIGAN  
Mayor



MARK DOMENICO  
Director

## DEPARTMENT OF CODE ENFORCEMENT

### Plumbing Permit Application

This information shall be provided by the applicant in order to process the permit application.

1. Address where work is being performed \_\_\_\_\_
2. Property Owner: Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_  
Email \_\_\_\_\_
3. Contractor: Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_  
Email \_\_\_\_\_
4. Contractor must note which insurance requirement will be submitted with application.  
Workers' Comp \_\_\_\_\_ CE-200 \_\_\_\_\_
5. Project Start Date \_\_\_\_\_
6. Approximate cost of work being performed \$ \_\_\_\_\_
7. Are site utilities included in the scope of work? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please check all that apply: Sanitary Sewer \_\_\_\_\_ Septic \_\_\_\_\_ City Water \_\_\_\_\_ Well \_\_\_\_\_
8. Will any work take place in the city right of way? Yes \_\_\_\_\_ No \_\_\_\_\_  
**If yes, you must obtain a right of way permit from the Engineering Office on the 3<sup>rd</sup> floor of City Hall.**
9. Please check the appropriate box. Commercial \_\_\_\_\_ Residential \_\_\_\_\_ Conversion? Yes \_\_\_\_\_ No \_\_\_\_\_  
If commercial, is there an existing water meter? Yes \_\_\_\_\_ No \_\_\_\_\_  
If no, please contact Tony Nash @ 315-339-7773  
**Commercial occupancies must install a water meter.**
10. Does this occupancy require a backflow device? Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_  
If yes or not sure, please contact Paul Dousharm @ 315-838-1754 to discuss further.

### Description of Work Being Performed

**You must include fixture count and fixture type**

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Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*For Official Use Only:*

Date Received: \_\_\_\_\_ Initials: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

