

INCORPORATED VILLAGE OF OYSTER BAY COVE
BUILDING DEPARTMENT
68 WEST MAIN ST., OYSTER BAY, NEW YORK 11771
(516) 922-1071
APPLICATION FOR PLUMBING FIXTURES
APPLICATION MUST BE TYPEWRITTEN OR PRINTED IN INK LEGIBLY.

SECTION: _____ BLOCK: _____ LOT:

OWNER:

NAME STREET ADDRESS POST OFFICE ZIP PHONE#

PLUMBER:
ADDRESS OF CONSTRUCTION:

IF DIFFERENT FROM ABOVE NO. & STREET POST OFFICE ZIP

LOCATION OF PROPERTY:

N.E.S.W. SIDE OF: _____ FEET

(STREET) (DIMEN)

N.E.S.W. OF _____

(STREET) (POST OFFICE)

N.E.S.W. OF _____ corner of _____ and _____

(STREET) (STREET&POST OFFICE)

TYPE OF BUILDING:

PROPOSED: _____ **MAINTAINED:** _____

FIXTURE COUNT: **Draw schematic diagram below-must indicate type of piping, Size, runs, & venting:**

	B	1st	2nd	
Water Closet				
Lavatory				
Bath Tub				
Shower				
Kitchen Sink				
Dish Washer				
Washing Machine				
Slop Sink				
Indirect Waste				
Urinal				
Other				

PLUMBER’S INFO: _____ Sworn to before me this _____ day of _____ 20____

LICENSE #: _____
NAME(Print): _____
BUSINESS ADDRESS: _____

Phone#: _____
Acknowledged: _____

Master Plumber (Signature) Notary Public

