

**INCORPORATED VILLAGE OF UPPER BROOKVILLE  
 BUILDING DEPARTMENT  
 PO Box 600, Oyster Bay, New York 11771  
 (516) 624-7715 Ext. 2  
APPLICATION FOR PLUMBING FIXTURES**

SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

OWNER/  
 LESSEE:

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			
Laundry Tub			
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