

PLUMBING PERMIT APPLICATION
Town of Islip Building Division

ISLIP TOWN PLUMBER'S LICENSE REQUIRED
ALL PAPERWORK FOR PLUMBER MUST BE
UP-TO-DATE IN TOWN FILE)

PROPERTY OWNER

Name Bruno, Paulette
Address 49 Otis Rd
Islip Terrace ZIP 11752
Telephone _____

ALL QUESTIONS MUST BE ANSWERED

- 1) Plumbing Permit — Fill in Boxes on Right ▶
- 2) Commercial & Industrial — Plumbing and/or HVAC must have 3 sets of plans signed and sealed by architect
- * 3) Will there be gas piping YES NO
Mercury test by the Town will be required

4) Riser Diagram is required for residential permits
~~+ New at the furnace (furnace by other)~~

*Gas Piping permits require a gas riser diagram drawn on the plumbers letterhead.

**Air Conditioning permits require diagram of duct work.
* 1st floor both direct replacement

PROPERTY LOCATION

Street 49 Otis Rd, Islip Terrace

Nearest Cross Street _____ Direction from Cross Street N S (E) W
Distance from Cross Street _____ N S E W
SW NW

PLEASE BRING COPY OF THE ISSUED BUILDING PERMIT WITHOUT THE PROPER BUILDING PERMIT BEING IS:

I swear that this application is a true and complete statement in effect all required insurance, including Workers Compensation

25300 0300 052000 K 003

BRUNO 11/29/05
49 OTIS RD 11752
ISLIP TERRACE, NY
GAS PIPING, HEAT, 6 FIXTURES

N BE ISSUED

es. that I have
... my valid Islip Plumbing License.

OFFICE USE ONLY

0500- 253-3-52

Address 49 Otis Rd

Town Islip Terrace

Date Filed 11/22/05

Approved by _____

Fee 275 Receipt No. PRO57129

Date Issued 11/29/05 By JM Expires 11/29/06

A Permit shall expire one (1) year after date of issuance. Upon payment of the proper fees, a permit may be renewed, but not more than three (3) renewals may be granted.

	Total # of fixtures	Bsmt	1st	2nd	3rd
<input checked="" type="checkbox"/> Heat <u>NG</u>	Water clos.	<u>REP</u>	<u>1</u>	<u>1</u>	
<input type="checkbox"/> Air Cond.**	Lavatories	<u>REP</u>	<u>1</u>	<u>2</u>	
<input type="checkbox"/> Pub. Water	Tub/Show.	<u>REP</u>	<u>1</u>	<u>2</u>	
<input type="checkbox"/> Dom Hot Water	Sink				
<input type="checkbox"/> Well Water	Wash. Mach.		<u>1</u>		
<input type="checkbox"/> Sprinkler <u>90</u>	Dish Wash				
<u>100</u>	Urinal				
<u>35</u>	Gr. Trap				
<u>50</u>	Bidet				
<u>275</u>	Whirlpool Tub				
	Future Out				

Name Paulette Bruno
Print
Paulette Bruno
Signature of PROPERTY OWNER

Name Vincent L. Agenjo
Print
Vincent L. Agenjo
Signature of TOWN LICENSED PLUMBER

Town License # _____ Ter. _____

Sworn to before me this 27th day of September, 2005

Sworn to before me this 21st day of November, 2005

Joanne C. Bechhoff
Notary Public

JOANNE C. BECHHOFF
Notary Public - State of New York
NO. 01BE5062577
Qualified in Suffolk County
My Commission Expires 7-1-06

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