



Certificate of Approval of Plumbing

Town of Oyster Bay Department of Planning and Development

Division of Building, 74 Audrey Avenue, Oyster Bay, New York 11771

No. G18804

04/05/96

Property Owner Information:

ARTHUR GRANATA 66 HOLLINS ROAD HICKSVILLE NY 11801

Property Information:	Section:	Block:	Lot(s):	Zone:	SD #
	12	344	04	D	17
Located on:	Side of	Feet	of		Post Office
S/W/C	HOLLINS ROAD	AND	VASSAR LANE		HICKSVILLE

Address of Installation: 66 HOLLINS ROAD HICKSVILLE

Plumber/Contractor Information:

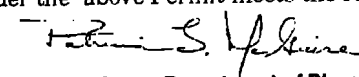
KEITH BRIGANDI 12 BAY AVENUE HICKSVILLE

Appl. No.	Permit No.	Permit Date	Gas/Oil/Plb. #	Gas/Oil/Plb. Date	Sewer No.	Sewer Date	Receipt No.	Insp.	Date
816	L47020	04/02/96					H117780	VR	04/04/96

Work Completed:

THREE (3) EXISTING FIXTURES, BASEMENT
(WC, LAV, BT), FINAL INSPECTION ONLY.

This certifies that the above Plumbing and Drainage installed under the above Permit meets the requirements of the Plumbing code of the Town of Oyster Bay.


Commissioner, Department of Planning and Development



Initials

DPD Certificate of Approval of Plumbing - SBL Copy

Town of Oyster Bay

Building Permit

NO. L 147020

Department of Planning and Development
(516)624-620074 Audrey Avenue, Oyster Bay, New York 11771
FAX (516) 624-6240

S.D.	Section	Block	Lot(s)	Zone	Application No.	ZBA Number	Receipt No.
17	12	344	04	D	816 96		H117780
Date							

Permittee Keith Brigandi 12 Bay Avenue New York 11801	Contractor Plumber Keith Brigandi 12 Bay Avenue Hicksville, New York 11801
Property Owner Arthur Granata 66 Hollins Road New York 11801	Heating Sanitary

Address of Actual Construction66 Hollins Road
Hicksville New York 11801**Additional Information**

Plumbers license#B1106

Permission Granted for the Maintenance of:

Three (3) Plumbing Fixtures on Basement Level, (1-WC, 1-LAV, 1-BT) as per NYS Plumbing Code.

ZONING REVIEW: ONE FAMILY DWELLING ONLY

A Certificate from an Approved Electrical Inspection Co. is to be placed on file prior to issuance of a Certificate of Occupancy/Approval/Completion.

Please note that when two numbers are shown, the number on the left is the existing structure, the number on the right is the proposed structure

Located on:		Side of		Feet		of		Post Office	
S/W/C		Hollins Road		and		Vassar Lane		Hicksville	
STRUCTURE WIDTH		DEPTH		HEIGHT		STORIES		FRONT YARD	
REAR YARD		SIDE YARD		SIDE YARD		FR SIDE YARD		SEWER	
S BLOCK		PRECAST		SEPTIC TANK		DRY WELLS		No PLUMB FIXTURES	
		GAL				3		No. Burners	
								OIL GAS COAL	
SPRINKLER HEAD		OIL TANK INSIDE		OIL TANK OUTSIDE		HOT WATER HEATER			
		GAUGE GAL		GAUGE GAL					

FEE FOR	AMOUNT
CONSTRUCTION	
PLUMBING	\$50.00
BURNER	
AC Unit	
TANK	
SANITARY	
CONSTR CO	
Cert of Comp	
PLUMB CA	\$5.00
TOTAL FEE	\$55.00

Occupancy of this new building or addition or alteration prior to the issuance of a Certificate of Occupancy will be considered a violation of the Code of the Town of Oyster Bay. Prompt notification by the various contractors for inspections of their respective parts of the work will avoid delay in the issuance of the Certificate of Occupancy. Permit must be posted on job site, visual to public inspection, until completion of the work and inspections.

- Inspections: Normally there are 14 or more required inspections of a new building and as many as apply to alterations and additions.
1. Soil Conditions-Before foundation footings are poured, Forms in place
 2. Foundation footings & key with re-bar.
 3. Foundation forms & re-bar before poured.
 4. Concrete walls and other concrete while being poured
 5. Foundation walls & Tar Membrane before backfill.
 6. Framing-Before insulation or lathing (foundation location survey)
 7. Rough enclosed (insulation)-Before exterior/interior finish is applied
 8. Final on construction-When ready for certificate of occupancy
 9. Plumbing-Roughing, when ready for water test
 10. Flange inspection-8A sewer connection if used
 11. Plumbing final-when ready for certificate of approval
 12. Burner-When installed with tank in place
 13. Tanks-Outside before being covered
 14. Sanitary-(1)Excavation(2) Construction(3) Special
 15. Demolition Inspections are required-check with Inspector

Changes regardless of size from the stamped approved plans must be submitted to the Department of Planning and Development and approved before the changes are made. Approved plans must be retained on the job and available to inspectors at all times.

Date Issued: 04/02/96 Work must start by: 10/02/96

C.O. must be Issued by 04/02/97 or permit will expire unless renewed prior to expiration.

Permittee's copy of approved plans must be available at the site for all inspections

Commissioner, Department of Planning and Development



Plumbing Inspector's Report

Date: 4/4/96 Time of Inspection: Start: _____ Finish: _____
Location of Inspection: 66 HOLLINS RD. HICKSVILLE
Section: 12 Block: 344 Lot(s): 4 Zone: D Permit #: L47020
Property Owner's Name: GRANATA Telephone: 938-6304
Plumber's Name: BRIGANDI Telephone: 433-1740
Plumber's Address: 12 BAY AVE. HICKSVILLE License #: B1106
Number of Fixtures Installed: 3 Number of Existing Fixtures: _____

<input type="checkbox"/> Plumbing	<input type="checkbox"/> Tank Inspection
<input type="checkbox"/> Underground plumbing	<input type="checkbox"/> Test approved on tank before installation
<input type="checkbox"/> Rough plumbing	<input type="checkbox"/> Soil and excavations approved
<input type="checkbox"/> Water test on rough plumbing	<input type="checkbox"/> Test approved after installation
<input type="checkbox"/> Lead bend/brass flange	<input type="checkbox"/> Tank piping approved
<input checked="" type="checkbox"/> Pressure test on water piping	<input type="checkbox"/> Above ground tank base approved
<input type="checkbox"/> Final Inspection	<input type="checkbox"/> Above ground tank approved
<input type="checkbox"/> Water service completed	
<input type="checkbox"/> Gas test completed	<input type="checkbox"/> Fire Sprinkler Test
<input type="checkbox"/> RPZ valve completed	<input type="checkbox"/> Number of heads tested
<input type="checkbox"/> Sewer installation approved	<input type="checkbox"/> New installation approved/200lb test
<input type="checkbox"/> Final seal test	<input type="checkbox"/> Alteration approved/50 over static pressure
<input type="checkbox"/> Lawn Sprinklers	<input type="checkbox"/> Approve double check valve installation
<input type="checkbox"/> Vacuum breaker	<input type="checkbox"/> Violations
<input type="checkbox"/> Solar heating	<input checked="" type="checkbox"/> Comply by
<input type="checkbox"/> Hot tub	<input type="checkbox"/> No previous rough inspection approved
<input type="checkbox"/> Grease trap <input type="checkbox"/> Inside <input type="checkbox"/> Outside	<input type="checkbox"/> Unable to gain entry
<input type="checkbox"/> Sewer Ejector Pump	<input type="checkbox"/> Neoprene flexible couplings not permitted
<input type="checkbox"/> Sump Pump	<input type="checkbox"/> Slip tubing traps not permitted
<input type="checkbox"/> Boilers	<input type="checkbox"/> 2"x 1 1/2" kitchen sink trap required
<input type="checkbox"/> Other	<input type="checkbox"/> Other

Comments:

BASMENT - WC, LAV, BT EXISTING
FINAL ONLY

☐ Please Note: Do not close or cover the work until a new inspection has been approved.

Inspection Approved: ☒ Yes ☐ No Document to Be Issued: C/A
Report to Contractor: ☒ In Person ☐ Left on Premises
Report to Homeowner: ☐ By Mail Inspector's Extension: 6201
Received By: _____ Inspector's Signature: [Signature]