

Plumbing Permit Application Right Of Way Application



City of Cortland Fire Department

Code Enforcement Office

25 Court Street

Cortland, New York 13045

Permit #: _____

Phone: 607.753.1741

Fax: 607.753.6051

Instructions:

A. Provide a detailed floor plan sketch or isometric drawing of the proposed construction, including plumbing fixtures, domestic water lines, DWV and sewer piping. **This office will notify applicant of any discrepancies upon completion.**

B. No work shall commence until plumbing permit is issued. The permit will be displayed on the premises throughout the project.

C. A signature is required on this application.

ALL JOBS SHALL BE INSPECTED

WORK ADDRESS: _____

PROPERTY OWNER: _____

LICENSED PLUMBER: _____

IS THIS A NEW INSTALLATION OR REPLACEMENT INSTALLATION? _____

WHAT IS THE OCCUPANCY OF THIS BUILDING? _____

Base Fee: New or extending existing for single family home \$105.00 plus fixture fee.
New or extending existing for all other structures \$150.00 plus fixture fee.
Replacement of existing fixtures in all structures \$50.00.

Sewer Fee: Commercial lateral \$150.00 / Residential \$75.00

List the number of plumbing fixtures: \$4.00 each

Water Closet		Laundry		Fountain	
Lavatory		Urinal		Floor Drain	
Tub		Water Heater		Sink	
Shower		Dish Washer		Sewer	
Kitchen Sink		Disposal		Other	

Piping Material:

Domestic Water		Drain & Waste	
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I, the undersigned licensed Plumber/Heating Technician/Owner, submit this plumbing permit application to the Code Enforcement Office for the issuance of a permit to perform plumbing/heating work as described herein and in so doing, acknowledge that all plumbing/heating work will be performed in accordance with all applicable codes and regulations. I also certify that all work will be performed: (check one only)

By me personally by a licensed employee of my company

Provide Email or Fax to Return Permit: _____

Provide a Contact Phone Number: _____

Signature of Licensed Plumber / Property Owner

Date

For Office Use Only:

Date Application Received: _____

Permit Fee: _____

Flood Plain: _____

Billed or Paid: _____

Conditions: _____

Issuing Officer's Signature: _____

Date: _____