



**INCORPORATED VILLAGE OF PLANDOME HEIGHTS**

37 Orchard Street

Manhasset, New York 11030

(516) 627-6902 Fax (516) 627-1393

**PLUMBING / HVAC / SEPTIC & DRAINAGE / OIL TANK  
PERMIT  
REQUIREMENTS AND CHECKLIST**

\_\_\_\_\_ The Plumbing Application in duplicate

**PLUMBING APPLICATION**

\_\_\_\_\_ Owner's Affidavit  
\_\_\_\_\_ Plumbing Riser Diagram with size of pipes  
\_\_\_\_\_ Plumber's name, address, telephone number and license number  
\_\_\_\_\_ Fixtures checked on back of permit

**SEPTIC & DRAINAGE APPLICATION**

\_\_\_\_\_ Owner's Affidavit  
\_\_\_\_\_ Contractor's name, address, telephone number and license number  
\_\_\_\_\_ Survey showing location of drainage  
\_\_\_\_\_ Section of dry wells or septic showing size  
\_\_\_\_\_ Calculation on 3 inches rainfall (driveway run-off must be included)

**HVAC APPLICATION**

\_\_\_\_\_ Owner's Affidavit  
\_\_\_\_\_ Contractor's name, address, telephone number, license number  
\_\_\_\_\_ Survey showing location of HVAC units

**BURNER/OIL TANK APPLICATION**

\_\_\_\_\_ Owner's Affidavit  
\_\_\_\_\_ Plumber's name, address, telephone number and license number  
\_\_\_\_\_ Make/Model Number of Burner

**FEES**

•PLUMBING PERMIT APPLICATION	\$ 50.00 Plus \$ 15.00 Per Fixture
•SANITARY/ SEWAGE SEPTIC TANK/ HVAC	\$ 100.00
•CERTIFICATE OF APPROVAL	\$ 50.00



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**APPLICATION FOR PERMIT**

**PLUMBING, HEATING, DRAINAGE, SEWAGE DISPOSAL AND HVAC**

This application shall be filled out in duplicate. When approval stamp with signature is affixed below and returned to you, then this application becomes a Plumbing, Heating, Drainage, Sewage Disposal and HVAC Permit. The application process and permit are subject to the conditions printed on the back. The Applicant is admonished to read the conditions on the back carefully.

All permits issued by the Building Department are strictly subject to the Zoning and Building Codes of the Incorporated Village of Plandome Heights and all New York State fire codes and construction codes applicable on the date of the application. NO ERROR OR OMISSION IN THE ISSUANCE OF A PERMIT SHALL LEGALIZE ANY CONSTRUCTION OR USE OTHERWISE PROHIBITED BY LAW.

<b>NEW BUILDING</b> [ ]	<b>ADDITION</b> [ ]	<b>REPAIR</b> [ ]	<b>PLUMBING</b> [ ]
<b>BURNER/OIL TANK</b> [ ]	<b>DRAINAGE</b> [ ]	<b>HVAC</b> [ ]	<b>GAS PIPING</b> [ ]

**Section:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Lot (s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address of Permit Activity:**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Zone: \_\_\_\_\_ Cross Street: \_\_\_\_\_

**Owner's Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Corp. Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
EMAIL Address: \_\_\_\_\_

( ) Plumber ( ) HVAC Contractor ( ) Sprinkler Contractor ( ) Drainage Contractor

**Plumber/Contractor Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Corp. Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Cell Number: \_\_\_\_\_ License Number: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**OWNERS AFFIDAVIT**

I (we) hereby certify that:

- I (we) agree to permit the Plumbing Inspector and any officer or employee of the Incorporated Village of Plandome Heights to enter upon the premises in the discharge of their duties with this application.
- Permit shall expire three [3] months from the date of issuance unless construction is in progress. No work is to be started until permit has been received and posted by the owner/applicant/plumber.
- Plumbing Inspector shall be given a minimum of 48 hours notice to make the required inspection and no work shall continue until such

**NOTE: All existing fixtures on property must be listed with new work highlighted.**

Fixtures	Location				Date of Insp.
	B	1st	2nd	3rd	
Location					
Water Closet					
Lavatories					
Bathub					
Shower					
Bidet					
Urinal					
Kitchen Sink					
Sink Other					
Indirect Wastes					
Dishwasher					
Laundry Tub					
Washing Machine					
Floor Drains					
Drinking Fountain					
Water Cooler					
<b>INFRASTRUCTURE</b>					
Septic Tank					
Leaching Pool					
Drywell					
Main Water Service					
Fuel Tank Size					
Lawn Sprinkler Zones					

( ) Gas ( ) LP Gas ( ) Oil

Location	B	1st	2nd	3rd	Date of Insp.
# Ft Gas Piping					
HVAC Unit					
Furnace Gas/Oil					
Stove/Oven					
Boiler Gas/Oil					
H/W Heater Gas/Oil					
Indirect Storage Tanks					
Dryer					
Generator					
Gas Fireplace					
Unit Heater					
Heater Coil					
Indirect Gas Heater					
Pool Heater					
Barbeque					

**NO. OF FIXTURES:**

NEW \_\_\_\_\_ EXISTING \_\_\_\_\_ TOTAL \_\_\_\_\_

**NO. GAS APPLICANCES:**

NEW \_\_\_\_\_ EXISTING \_\_\_\_\_ TOTAL \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ADDITIONAL REQUIREMENTS:**

- Schematic riser diagram required for sanitary piping Plumbing Permit.
- Schematic piping plan illustrating length of pipe runs required for Gas Piping Permit.
- Survey required for Drywell & Septic Cesspool Permits.
- Survey illustrating location of exterior placed equipment required for HVAC Permit.

**FOR OFFICE USE ONLY**