



Town of Ramapo

237 Route 59
Suffern, NY 10901

845-357-5100 PHONE 845-357-5140 FAX

PLUMBER'S INFORMATION FORM

License Number: _____

Licensed Plumber's Name: _____

Plumber's Company Name: _____

Plumber's Company Address: _____

Plumber's Phone Number: _____

Work Location: _____

Fixtures to Be Installed:

New Building: _____

Alteration: _____

Addition: _____

Repair: _____

New Service: _____

Baths: _____ Urinals: _____

Lavs.: _____ Shower Stalls: _____

Water Closets: _____ Kit. Sinks: _____

Laundry Tub: _____

Total Number of _____

Fixtures:

- I understand that I must call for all inspections.
- I further understand that a copy of my license and proof of worker's compensation and liability insurance must be submitted to our office and maintained for the duration of the project.
- For any permit involving installation or alteration of gas piping, O & R must be contacted and their integrity test results submitted to our office for review.

Plumber's Signature _____

Anyone misrepresenting themselves as a licensed plumber in the Town of Ramapo is subject to a \$5,000 fine and/or 15 days in jail.