

TOWN OF SOUTHEAST BUILDING DEPARTMENT
One Main Street Brewster, NY 10509 845-279-2123, fax 845-279-2971

GAS INSTALLATION PERMIT APPLICATION

Gas Installation Permit # _____ Date Application Received _____ Permit Issue Date _____ Approved by Zoning _____, Bldg _____ (office use only)
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Property Address: _____
Tax Parcel Id: _____ Zoning District: _____

Property Owner Name: _____ Phone(s): _____
Street Address: _____
City _____ State _____ Zip Code _____

Plumbing Contractor:
Name _____ Phone(s): _____
Address: Street _____
City _____ State _____ Zip Code _____
Putnam County License # _____

PROJECT DESCRIPTION _____

Provide an accurate, clearly drawn or engineered riser diagram of all gas lines and connections with application.

A gas installation permit is required for Natural and LP gas installations.

Applicant must provide a copy of their current Putnam County License and workers compensation and liability insurance certificates; acceptable workers comp forms include WC/DB 100(9/07), C105.2 (9/07) and U26.3. BP-1 (9-07) not accepted for New construction as house is not yet owner occupied and C of O has not been issued.

No work may be started until a permit for the work is issued. Work started without a permit will result in a Stop Work Order being issued.

Permits approved by the Southeast Building Inspector will be forwarded to the Putnam County Plumbing Board. The Plumbing Board will issue a three part inspection certificate and forward it to the Plumbing Code Enforcer. It shall be the responsibility of the plumbing contractor to contact the county Plumbing Code Inspector for inspection.

Type of Construction

Commercial ☐ Tenant Space ☐ Single Family Residential ☐ Multi-Unit Residential ☐

Required Fees

Commercial: \$150 for 1-5 Connections; \$10 for each additional connection

Fee: _____

Residential: \$75 for 1-5 Connections; \$10 for each additional connection

Fee: _____

The Owner/Applicant and Licensed Plumber agree to comply with all applicable laws of this jurisdiction, adhere to the plans and specifications submitted and permit Building Department personnel to perform required inspections.

Applicant's Name _____ (attach owner consent form)

Owner/Applicant Signature: _____ Date _____

Licensed Plumber Signature: _____ Date _____

Application Fees

Total Fees (check or money order payable to Town of Southeast) _____

Town of Southeast Building Department

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Owner Consent Form

- Completion of this form is required when the applicant is not the property owner

Parcel Id # _____ Permit # _____

Name of Applicant: _____ Phone _____

Project Description: _____

I/We, _____, owners(s) of the
above property hereby give my/our permission to _____
(applicant name) to submit the above identified building permit application on my/our
behalf and to represent me/us in all proceedings concerning the referenced application.

_____ Date _____
Owner (s) Signature(s)

Sworn to before me this _____ day of
_____, _____.

Notary Public

