



# CITY OF BUFFALO - Department of Permit and Inspections PLUMBING DEPARTMENT

65 Niagara Sq. City Hall Room 312 Buffalo, NY 14202  
Phone (715) 851-5067

## Application - MASTER PLUMBER LICENSE

This is the application for a Master Plumber License.  
Complete all applicable sections. An incomplete application may result in rejection.

**Applicant Name** \_\_\_\_\_

**Home Address** \_\_\_\_\_  
(PO box not acceptable) street city state zip

work phone \_\_\_\_\_ cell phone \_\_\_\_\_ home phone \_\_\_\_\_

date of birth \_\_\_\_\_ email \_\_\_\_\_

**Education** High School \_\_\_\_\_  
College \_\_\_\_\_  
Other \_\_\_\_\_

### Minimum Qualifications: 6000 hours worked as Journeyman Plumber as an employee of a licensed Master Plumber, not as working for yourself.

List all Journeyman Plumber licenses which you possess.

1. \_\_\_\_\_
2. \_\_\_\_\_

**Master Plumber licenses from other municipalities** may be used to meet qualification for work experience. A copy of all Master Plumber licenses must be submitted with this application if you choose to use them as work experience.

I declare that this application and all information listed upon it are correct and accurately reflect all plumbing work done by myself.

**Print Name** \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

See side 2 – this application must be notarized.

For office use only	
<b>Examining Board of Plumbers</b>	
Chairman	_____
	_____
	_____
	_____
	_____
Date accepted	_____

# MASTER PLUMBER AFFIDAVIT

**Master Plumber** \_\_\_\_\_ phone \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip

Subscribed and sworn before me this  
\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_  
\_\_\_\_\_  
Notary of Public Commissioner of Deeds

I hereby state that I am a duly licensed Master Plumber of (city) \_\_\_\_\_  
\_\_\_\_\_. I have read statements of (applicant) \_\_\_\_\_  
\_\_\_\_\_ as they apply to applicant's work  
experience. Applicant has worked \_\_\_\_\_ hours under my supervision, and  
I hereby certify such statements are correct.

**Master Plumber Signature** \_\_\_\_\_ date \_\_\_\_\_

**Master Plumber** \_\_\_\_\_ phone \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip

Subscribed and sworn before me this  
\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_  
\_\_\_\_\_  
Notary of Public Commissioner of Deeds

I hereby state that I am a duly licensed Master Plumber of (city) \_\_\_\_\_  
\_\_\_\_\_. I have read statements of (applicant) \_\_\_\_\_  
\_\_\_\_\_ as they apply to applicant's work  
experience. Applicant has worked \_\_\_\_\_ hours under my supervision, and  
I hereby certify such statements are correct.

**Master Plumber Signature** \_\_\_\_\_ date \_\_\_\_\_

**Master Plumber** \_\_\_\_\_ phone \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip

Subscribed and sworn before me this  
\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_  
\_\_\_\_\_  
Notary of Public Commissioner of Deeds

I hereby state that I am a duly licensed Master Plumber of (city) \_\_\_\_\_  
\_\_\_\_\_. I have read statements of (applicant) \_\_\_\_\_  
\_\_\_\_\_ as they apply to applicant's work  
experience. Applicant has worked \_\_\_\_\_ hours under my supervision, and  
I hereby certify such statements are correct.

**Master Plumber Signature** \_\_\_\_\_ date \_\_\_\_\_