City of Buffalo - Department of Permit and Inspections
65 Niagara Sq. City Hall Room 312 Buffalo, NY 14202 (716) 851-5067 fax (716) 851-5506

PLUMBING DEPARTMENT - PERMIT APPLICATION

Permit address _____ Buffalo, NY _____
number street zip

_____ single family dwelling _____ two family dwelling _____ other

Property Owner *or* Business Name _____

Provide description of work performed _____

_____

DECLARED VALUATION _____

Information: Plans are NOT REQUIRED

Hot water tank replacement _____ total number replaced

Drain and/or sewer work _____ yes _____ no

Drain tiles _____ yes _____ no

Multiple dwellings _____ total number of units

Other work _____ yes _____ no

FEES when Plans are NOT required

Application fee	$25.00
Permit/inspection fee	_____
TOTAL FLAT FEE	_____

Information: Plans ARE REQUIRED

Occupancy/Use of Building/Work Area	square footage

Site storm piping ___ yes ___ no _____ total sq. footage

FEES when Plans ARE REQUIRED

Application fee	$25.00
Plan review fee	_____
Permit/inspection fee	_____
Site Storm Piping	
Plan review fee	_____
Permit/inspection fee	_____
TOTAL FEE with PLANS	_____

I, the undersigned request permission to perform plumbing work within the City of Buffalo and I understand that all such work shall be in compliance with all applicable Codes, Rules & Regulations. I further declare under penalties of perjury, that I have examined said application and all information listed upon it is correct and accurately reflects all plumbing work being performed by myself and/or my company.

Licensed Master Plumber _____ license # _____

Business Name _____ phone _____

Master Plumber Signature _____ date _____

Permit approved by _____ date _____

For office use only: Application # _____