AMHERST 631-7080
BUILDING
DEPARTMENT

"Building Safety is No Accident"

2024 PLUMBING ONLY PERMIT

MAKE CHECKS PAYABLE TO: TOWN OF AMHERST
AMHERST BUILDING DEPARTMENT | 5583 MAIN ST. | WILLIAMSVILLE, NY 14221
PERMIT MUST BE PROCESSED PRIOR TO STARTING WORK

Job Address:				
Property Owner Name:			Phone: (Property Owner)	
Property Owner Address: *(If Different From Job Address)			Owner Email:	
Contractor (Business Name):				
Licensed Plumber Name:			License#	
Contractor Address:			License Expiration:	
Phone:			Email:	
Estimated Value of the Work:	\$		Installation Date:	
Description of Proposed Work:				
FEES				
□ New Plumbing \$			\$	
☐ Alterations/Repairs		\$		
☐ Sanitary		\$		
□ Storm		\$		
☐ Fixtures		\$		
□ Water		\$		
□ Other		\$		
TOTAL		\$		
REQUESTS FOR INSPECTION MUST BE MADE IN ADVANCE				
I, the undersigned property owner or authorized agent of the owner, am familiar with the requirements of the Workers Compensation Law and declare that (check the following): I have filed the required proof as affirmed by my insurance carrier. I have no people working directly for me and therefore require no Workers Compensation Insurance. Should there be any change in my status during the exercise of this permit, I will so advise the Building Department and comply with all requirements.		owner hereby agrees to comply with the Ordinances of the Town of Amherst an County of Erie and the State of New provide a means of entry to the premise owner or authorized agent of the owner	the undersigned property owner or authorized agent of the ne terms thereof, the Laws of the State of New York, the d the regulations of the various departments of the Town, York, request all necessary inspections and authorize and s for the Inspector. Furthermore, the undersigned property has read and will comply with these conditions. horized agent of the owner hereby certifies that all of the orrect.	PERMIT#
PLUMBING PERMIT FEE: \$ Make checks payable to: Town of Amherst (No cash)		X		PP
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		Registered Applicants Signature		-2
TOWN CLERK RECEIPT OF FEE: Receipt is hereby acknowledged of the sum of \$ being the permit fee established by the Town Board of the Town of Amherst, NY.		I do certify that a Code Enforcement Official has examined the foregoing application and supporting documentation and to the best of his/her		024-
Town Clerk		Build	ding Commissioner	
Issue Date: This permit expires six months from date of issue if work has not commenced.		NOTICE CONDITIONS, INSTRUCTIONS & REQUIRED. INSPECTIONS The Building Department reserves the right to reject any work which has been concealed or completed without first having been inspected and approved by the department in accordance with the requirements of the various codes. Reasonable, safe access must be provided to all areas of the work. ALL REQUESTS FOR INSPECTION MUST BE MADE 24 HOURS IN ADVANCE		

DIRECTIONS:

A. Enter the location for the work to be done.

(Our jurisdiction is the entire Town of Amherst outside of the Village of Williamsville. Note that it may be confusing for some locations. For example most of the postal zone (14221) known as Williamsville is in the Town, but it also covers the Village of Williamsville, a portion of the Town of Clarence (not or jurisdiction) and a piece of the Town of Lancaster.)

When in doubt contact our office for an address verification.

B. Enter an estimate of the project cost.

(This item is very important as the computer system requires an estimated cost. Be as accurate as possible, but these can be approximate estimates. We use this figure only for statistical purposes and as a guide for work load analysis since often the higher the project cost the greater the inspection time.)

C. Indicate when the work will be performed.

The contractor is responsible for scheduling the inspection. If the contractor does not schedule the inspection in a timely matter the property owner will ultimately be held responsible.

D. Provide a description of the work.

- 1. For equipment installed outside on residential property a copy of a survey indicating the location of the equipment must be provided. If a copy of a survey is not available contact the building department for instructions.
 - For equipment installed outside on non-residential property a copy of a survey and/or copy of site plan approved by the Amherst Planning Department must be provided.
- 2. On residential properties no exterior heating or air-conditioning structure or equipment shall be located within three (3) feet of any lot line, in accordance with the Zoning Ordinance.
- 3. For equipment such as generators indicate the make, model and size of unit.
- 4. For interior equipment a plan or sketch indicating the location within the building must be provided
- 5. Manufacturers' installation instructions must be available to the inspector at the job site
- 6. All equipment must be installed in accordance with the manufacturers' installation instructions, the applicable International Codes, the National Electric Code and the NYS Uniform Code Supplement.
- 7. Smoke detectors must be installed in accordance with International Residential Building Code Section R314 and NYS Uniform Code Supplement.
- 8. Carbon monoxide detectors must be installed in accordance with International Residential Building Code Section R315 and NYS Uniform Code Supplement.

E. Workers Compensation & NYS Disability Insurance requirements

If insurance is not on file provide NYS attestation of exemption form CE-200 with each permit application.

Note: The full requirements for smoke and carbon monoxide detectors in residential construction is available at the Building Department Offices

This department is requiring a contractor or property owner to address these code matters in association with the issuance of any building, plumbing or electrical permits. Before a permit is issued, you will need to provide information as to how you are going to achieve compliance with the code.