

MALVERNE BUILDING DEPARTMENT APPLICATION

99 Church Street Malverne, NY Phone 516-599-1200 Fax 516-823-0767

PLUMBING PERMIT

(Page 1 of 2)

Incomplete applications will not be accepted. All fees are non-refundable.

Date: _____

Permit App # _____

Owner Name: _____ Phone # _____ Email: _____

Address of Project: _____ Malverne, NY 11565

Check all that apply:

Residential: ___ Commercial: ___ As Built: ___ New Work: ___ Direct Replacement: ___

Scope of Work: _____

Application Instructions and Information for Paper Submittals:

- Separate HVAC and permanent gas fueled Generator permit application is required for any Hot Air Furnaces, HVAC combo and split units, make up air units, generators, and central air systems. **Submit specification sheets with installation instructions for proposed equipment including boilers, water heaters and combo units.**
- Separate plumbing permit shall be filed for Heating Systems, as applicable. A separate Certificate of Compliance is required.
- Signed and Sealed P.E. or R.A. Plumbing drawings may be required for new commercial work.
- By signing this application, the licensed plumber acknowledges that although any NYS Code required chimney liner and/or carbon monoxide detector that is installed is "by others", they accept full responsibility for the procurement and installation of same. They also attest and affirm that only lead-free solder and lead-free potable water fittings and valves will be used during plumbing installations.
- Schematic Sanitary Riser Diagram is required for sanitary waste plumbing work.
- Carbon Monoxide / Smoke Detector Affidavit is required for stand-alone Residential applications.
- Plumbing permit application shall be required for direct replacements of fixtures and piping.
- Signed and Sealed P.E. or R.A. drawings required for ALL Fire Sprinkler Systems. Commercial Systems require proof of application and approval from the Nassau County Fire Marshal.
- **CALL THE BUILDING DEPARTMENT TO SCHEDULE INSPECTIONS. TYPICAL INSPECTIONS REQUIRED (AS APPLICABLE) ARE:**
1. Rough 2. Open Trench / Underground 3. Gas Pressure Test 4. Water Test 5. Final
- All gas tests shall be for the entire facility system, existing and new, and not localized unless otherwise approved by the plumbing inspector.
- The Licensed plumber of record shall be present at inspections.
- Fuel Oil Tank abandonments/removals shall be filed under a separate village permit application and with the county.
- Any street or sidewalk opening to be filed under a separate type of permit.

Plumbers Name: _____ Malverne License #: _____

Phone #: _____ Email Address: _____

Signature of Plumber (notarized)

Sworn to before me this ____ day of _____

NOTARY SIGNATURE _____

SEAL:

Signature of Property Owner (notarized)

Sworn to before me this ____ day of _____

NOTARY SIGNATURE _____

SEAL:

Village Approval Signature and Stamp

No registered plumber shall sign a plumbing permit or act as an agent for a person who is not a licensed in the Village of Malverne. I understand by signing below that my license in the Village of Malverne could be in jeopardy by violating the above section. Applicant certifies that all information given is correct and that all work shall conform to the current NYS Residential, Building, Plumbing, Fire, Existing Building, Energy Conservation, and Mechanical Codes and all Village Ordinances for which this permit is issued. No work is to be performed until a permit has been issued by the Incorporated Village of Malverne.

OK to Issue Certificate of Compliance or Letter in Lieu _____

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PLUMBING PERMIT

(Page 2 of 2)

Address: _____ Permit / App # _____

TABLE 1

# FIXTURES / DEVICES TO BE INSPECTED	KITCHEN SINK	BATHROOM SINK	TOILET	SHOWER	BATH TUB	GAS STOVE / OVEN	REF. WATER / ICE DISP.	URINAL	DISHWASHER	FLOOR DRAIN	FLOOR SINK	MOP SINK / LAUNDRY TUB	GREASE TRAP	BIDET	GAS BBQ	GAS FIREPLACE	CLOTHES WASHER	GAS DRYER	RESIDENTIAL FIRE SPRINKLER HEAD	GAS SWIMMING POOL HEATER	DRINKING FOUNTAIN	ROOF DRAIN	OTHER: _____	
BASEMENT																								
FIRST FLR																								
SECOND FLR																								
ATTIC																								
EXTERIOR																								

Table 1 Plumbing Permit Fees: \$50.00 Each Fixture / Item

Total Number of Fixtures = _____

TABLE 2

# FIXTURES / DEVICES / PLUMBING TO BE INSPECTED	GAS PIPING \$50.00 PER UNIT (GAS TEST REQUIRED) POTABLE WATER PIPING \$50.00 PER ROOM SANITARY WASTE PIPING \$50.00 PER ROOM BOILER \$100.00 WATER HEATER \$75.00 HOT WATER STOR. TANK \$75.00 SEWER EJECTOR PUMP \$50.00 BACK FLOW PREVENTER \$50.00 COMBO BOILER / WATER HTR \$100.00 GAS CONVERSION / CHIMNEY LINER \$100.00 WATER SERVICE \$75.00 SEWER SERVICE \$75.00 FUEL OIL TANK (INTERIOR OR ABOVE GROUND) \$100.00 COMMERCIAL FIRE SPRINKLER SYSTEM (based on cost of installation) OTHER: _____ BACK WATER VALVE \$50.00	BASEMENT	FIRST FLOOR	SECOND FLOOR	ATTIC	EXTERIOR

Table 2 Plumbing Permit Fees: All Fees per Unit or per Room/Area. Applicable piping fees are required for all new fixtures, relocations, and maintain and legalize applications where not a direct replacement.

Fee from Table 1 = _____

Fee from Table 2 = _____

Certificate of Compliance (if applicable) = _____

(Standalone Plumbing Permits require a \$150.00 fee Residential; \$300.00 fee Commercial)

Maintain As Built Surcharge 100% of total fee (if applicable) = _____

TOTAL PLUMBING PERMIT FEE =

Village Approval Signature and Stamp



Incorporated Village of Malverne
BUILDING DEPARTMENT

99 Church Street, Malverne New York 11565-1726
Phone: (516) 599-1200 • Fax: (516) 823-0767

RESIDENTIAL SMOKE DETECTOR &
CARBON MONOXIDE AFFIDAVIT

State of New York

Building Permit # _____

ss:

County of Nassau

Plumbing Permit # _____

I _____ am the owner of real property located at:

_____ Malverne, New York.

I hereby attest the premises is a one or two family dwelling and affirm that in accordance with the provisions of Section R310 of the 2025 Residential Code of New York State, smoke alarms and heat detectors have been installed, maintained, and are in operable condition in the dwelling as noted below, as applicable for scope of work of the application.

1. Outside each separate sleeping area in the immediate vicinity of the bedrooms.
2. In each room used for sleeping purposes.
3. In each additional story within the dwelling unit, including basements and habitable attics, while excluding crawl spaces, and uninhabitable attics.
4. Interconnection of all smoke alarms shall be mandatory when interior wall and ceiling finishes are removed to expose the structure and or there is an attic, crawl space, or a basement available that could provide access for interconnection. Approved wireless units are also acceptable.

I hereby attest that in accordance with the provisions of Section R311 of the 2025 Residential Code of New York State and Section 915 of the Fire Code of New York State, carbon monoxide alarms have been installed, maintained, and are in operable condition in the dwelling where a carbon monoxide source exists, as noted below. Sources include but are not limited to gas or oil fired boilers, furnaces, and water heaters, wood or gas fireplaces, wood or coal stoves, and attached garages.

1. Outside each separate sleeping area within close proximity of the sleeping areas / bedrooms.
2. If there is a carbon monoxide source in the bedroom or an attached bathroom there shall be one located in the bedroom.
3. Approved combination smoke alarms / carbon monoxide detectors are acceptable.

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO THE PENAL LAW OF NY STATE

Dated: _____

Signature _____

Sworn to before me this _____ day of _____ 20

Owner - Print Name

Notary