Town of Riverhead Building Department
201 Howell Avenue, Riverhead, New York 11901
(631) 727-3200 Ext. 213, 268, 283
Fax: 631-208-8039
www.townofriverheadny.gov

PLUMBER'S AFFIDAVIT

Permit #_____Date:_____ SCTM#: 0600 -_____-_____-_____

Owner:_____Address:_____

Property Address:_____

SC License #_____Company Name: _____

I,_____, the Suffolk County Licensed Plumbing Contractor for the above referenced project, being duly sworn, deposes and says:

That I am familiar with the current applicable codes of the Plumbing Code of New York State within the Building Code of New York State for commercial projects and/or Part VII: Plumbing of the Residential Code of New York State for residential projects.

That plumbing work has been completed and is in substantial conformance with the approved plans and the applicable code, including, but not limited to, the use of lead free solder, the installation of anti-scold devices, and the installation of water supply protecting backflow devices. That by signing this affidavit, I am certifying plumbing work performed in association with this project whether personally done by me, my company, or others.

That let it be known that the Town of Riverhead has relied on this statement for the issuance of the Certificate of Occupancy or Compliance for the above referenced project.

_____
(Signature of Plumbing Contractor)

Sworn to before me this _____

day of_____, 20_____

_____
(Signature of Notary Public)