**Plumbing Control Section**

315-435-6614, fax 315-435-5425

7120 Henry Clay Blvd.

Liverpool, NY 13088-5344

www.ongov.net/WEP

|  |  |
| --- | --- |
| **J. Ryan McMahon, II, County Executive****Tom Rhoads, P.E., Commissioner****Nicholas Capozza, Sewer Maintenance Engineer** |  |

Application for Storm Water Piping Installation

Application #      Project name:      Municipality:

Location/address:

*Note:* This application pertains to the installation of the main storm sewer collection system including pipe sizes 8" or larger within or adjoining the property lines of any premises. The installation is limited to the last manhole or catch basin and does not include building storm sewer connections.

In undertaking construction of this project the undersigned acknowledges and agrees to abide by the following:

1. The installation will not be initiated until plans and specifications as well as construction material specifications have been submitted to Plumbing Control and written authorization to proceed is received.
2. A current Certificate of Insurance for liability and Workers' Compensation is furnished to Plumbing Control.
3. Inspection of the installation will be performed by (check *A* or *B*):
* *A*. I elect to have Plumbing Control conduct the required inspection. I understand that the piping installation must be left open for inspection by a representative of Plumbing Control. Request for Inspection may require 24-hour notice before inspection. Inspections are conducted between 8:00 a.m. - 3:00 p.m.
* *B*. I have hired a New York Stated licensed professional engineer or registered architect to perform the required inspection. A copy of a letter of commitment to inspect this installation is attached. The undersigned will submit a Letter of Certification.
1. That the municipality in which this project is located and the Department of Environmental Conservation (if required) have received notification of this project and have given a permit and/or approval which such permit and/or approval is required.

*Continued on following page.*

Installer:      Signature: Date:

Phone:      Fax:      Email:

*Fee payment*

|  |  |
| --- | --- |
| Storm sewer system review (one submission) | $100.00 |
| - Additional design submission |       x $75 = |       |
| - New storm sewer system permit | $75.00 |
| - If more than 2 inspection trips when inspected by Plumbing Control |       x $50 =  |  |
| **Storm sewer system review and permit total** | **$** |

Check #

Outlet to:

[ ] Public

[ ] Private

Approved by: Date:

Rev. 1/22/2010