



CITY OF AMSTERDAM
PLUMBING BOARD

61 CHURCH STREET
AMSTERDAM, N.Y. 12010

OFFICERS
Plumbing Inspector: Erwin Harnish
Secretary: Rosanne Rusnica

APPLICATION FOR CLASS "B" PLUMBERS LICENSE

I, _____ dba _____
(Licensed Plumber) (Please print in ink) (Business Name)

with a business address of: _____ Phone _____

City _____ State _____ Zip _____

and a home address of: _____ Phone _____

City _____ State _____ Zip _____

have read, fully understand, and agree to adhere to the requirements of Chapter 90, Articles IV and V adopted 8/13/07. I hereby apply for a Class B Master Plumbers License per Chapter 90, Section 39B and have attached the following documents as required with this application:

- * *Liability Insurance Certificate with minimum coverage of \$500,000 per occurrence and \$1,000,000 annual aggregate, which names the City of Amsterdam as additionally insured.*
- * *Workmen's Compensation documentation per Section 57 of the Workers' Compensation Law. (Form C-105.2 for insured, SI-12 for self-insured, or CE-200 with no employees)*
- * *Disability Benefits documentation per Section 220(8) of the Workers' Compensation Law. (Form DB-120.1 for insured, DB-155 for self insured, or CE-200 with no employees)*
- * *Current Masters License from another municipality. (and/or any other documentation which the Plumbing License Board of Examiners deems necessary to prove competency)*

to perform work at: _____
(job location)

Signature _____
(Licensed Plumber)

Sworn to before me this _____ day of _____, 201 _____

Notary Public / Commissioner of Deeds
Qualified in Montgomery County
Term Expires _____

Office Use Only Below

Commercial Property _____ Residential Property _____

License Application # _____ \$ _____ fee received this _____, 201 _____

Plumbing Permit # _____ Approved by: _____
(Plumbing Inspector)