



City of Amsterdam

Engineering Department

841-4331

61 Church Street, Amsterdam, NY 12010

Inspections - (518) 841-4319
Plumbing Inspector - (518) 841-4330
Fax - (518) 841-4310

AFFIDAVIT FOR HOME OWNER'S PLUMBING PERMIT

STATE OF NEW YORK :
COUNTY OF MONTGOMERY : ss.:
CITY OF AMSTERDAM :

Building Permit No. _____

Electrical Permit No. _____

Plumbing Permit No. _____

I, _____, do
(Name of Owner)

solemnly swear that I own the (one ___ two ___) family property located at
_____, in the City of Amsterdam,
(Street Address)

County of Montgomery, and State of New York, and will be **PERSONALLY** installing all of
the equipment as indicated on the permit application on file in the office of Building Inspections.

(Signature of Applicant)

(Date)

Sworn before me this _____ day of _____, 20 .

(Signature of Notary Public/Commissioner of Deeds)

APPROVED BY: _____
(Plumbing Inspector)

(Date)

Original copy of Affidavit to be filed with permit.