



## THE CITY OF POUGHKEEPSIE

New York  
BUILDING DEPARTMENT  
PO BOX 300  
POUGHKEEPSIE, NY 12602  
Phone: 845-451-4007  
Fax: 845-451-4006

### **APPLICATION FOR EXAMINATION** **HOMEOWNER'S PLUMBING PERMIT**

The Common Council has adopted an amendment to the Plumbing Code which will allow the owner-occupant of one and two family dwellings to perform limited plumbing work within the building itself, providing the home-owner successfully passes the homeowner's plumbing exam. This amendment is effective as of September 1, 1992.

The attached Application for Examination for Homeowner's Plumbing Permit must be completed for approval prior to examination. In order for the application to be processed, the following information must be provided:

1. Proof of ownership of the single or two family residence; and
2. Proof of residency in the single or two family dwelling; and
3. Homeowner's exempt form for Workman's Compensation, form **BP 1 (9/07)**.

The examination will be given every Monday, Tuesday, and Wednesday between 1:00 and 3:00pm. The exam consists of ten (10) multiple choice questions. To achieve a passing grade, the applicant must answer a minimum of seven (7) questions correctly.

If the applicant successfully passes the homeowner's examination, he/she may file for a limited plumbing permit to perform plumbing work within the building lines. If the applicant fails to pass the exam, there is a minimum waiting period of one (1) month before any re-examination may take place.

**PLEASE BE ADVISED THAT UNDER A HOMEOWNER'S PLUMBING PERMIT, NO WORK MAY BE PERFORMED ON SANITARY SEWERS, WATER SERVICE LINES, WATER METER AND GAS PIPING, ON ANY PUBLIC RIGHT OF WAY OR CITY STREET, OR OUTSIDE THE BUILDING LINES AT ALL.**



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**PLBL -\$20.00**

## APPLICATION FOR EXAMINATION HOMEOWNER'S PLUMBING PERMIT

I. ADDRESS: \_\_\_\_\_

II. CHECK ONE: \_\_\_\_\_ Single Family Dwelling

\_\_\_\_\_ Two Family Dwelling

III. OWNER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ (HOME) \_\_\_\_\_ (WORK)

IV. PROOF OF RESIDENCY:

a) DRIVER'S LICENSE # : \_\_\_\_\_

b) OTHER: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Sworn to before me on this  
\_\_\_\_\_ day of 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Plumbing Inspector

**FOR OFFICE USE ONLY**

APPROVED: \_\_\_\_\_

DISAPPROVED: \_\_\_\_\_

TEST SCORE: \_\_\_\_\_