



VILLAGE OF BROCKPORT

49 State Street · Brockport, New York 14420
Telephone (585) 637-5300 · Fax (585) 637-1045
Website: www.brockportny.org

Application for Plumber's License

FEE: \$ 25.00 Cash or Check payable to Village of Brockport

NAME OF PLUMBER OR COMPANY: _____

BUSINESS ADDRESS: _____

CITY/STATE/ZIP _____

BUSINESS PHONE: _____

NUMBER OF YEARS IN BUSINESS: _____

NAME OF PRINCIPAL OWNER OR OWNERS: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

CELL PHONE: _____

DATE OF BIRTH: _____

NAME OF INSURANCE COMPANY: _____

APPROXIMATE NUMBER OF EMPLOYEES: _____

\$100,00/\$300,00 LIABILITY COVERAGE	ACORD FORM ACCEPTABLE
\$50,000 PROPERTY DAMAGE	ACORD FORM ACCEPTABLE
COMPENSATION INSURANCE REQUIRED	C105.2 FORM
DISABILITY FORM	DB120 FORM

I, _____, hereby affirm that the Village of Brockport will be indemnified and saved harmless from all claims or damages caused or occasioned by any negligence in either the execution, performance or protection of work, or from any unfaithful or inadequate work done under or by virtue of work as a plumber. I have provided either a Plumber's License issued by a municipality inside Monroe County, or satisfactorily passed a test administered by the Village of Brockport.

Owner/Agent Signature

Date