



William D. Reilich
Supervisor

TOWN OF GREECE

Technical Services
ONE VINCE TOFANY BOULEVARD
GREECE, NY 14612
Telephone (585) 723-2443 Fax (585) 723-2457
www.greecenyny.gov

RE: PLUMBERS REGISTRATION

It is time to renew your registration to work in the Town of Greece. Per the Town Code, the following items are required to obtain your registration:

- A check for \$75.00 (One year) or \$100.00 (Two years) payable to the Town of Greece.
 - **First time registration with the Town of Greece is an additional \$40.00 fee, any/all licenses from other municipalities, and a working resume.**
- Completed enclosed registration form.
- Drivers License-photo ID
- **Liability, Workers Comp, and Disability Insurance Certificates indicating the Town of Greece as Certificate holder. (Workers Comp must be on form C-105.2 or U-26.3)**
- A list of all journeymen and apprentices employed by you including:
 - Name
 - Last four digits of Social Security No. or a photocopy of Drivers License

Please send the above documents to:

**Town of Greece
Technical Services Dept.
Attn: Jenna Lucas
One Vince Tofany Blvd.
Greece, NY 14612**

Your new Town of Greece registration will be mailed to you. If you have any questions, please feel free to call me at 723-2354.

Reminder: The Town of Greece no longer issues wallet-sized cards for you employees. Local law changes require that anyone engaged in plumbing present a driver's license or other suitable identification upon request of a Town employee. The Town employee will then verify the person's employment. Please make sure employees are aware of this requirement and remember to update your employee list with us every time you terminate or add an employee.

Sincerely,

Jenna Lucas
Technical Services



TOWN OF GREECE

1 VINCE TOFANY BOULEVARD ~
GREECE, NY 14612

Telephone (585) 225-2000 Fax (585) 723-2457

www.greecenyny.gov

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Supervisor

TOWN OF GREECE PLUMBER REGISTRATION

Year 20__ - 20__

Registration Fees: If you are registering for the “**first time only**” with the Town of Greece, an additional fee of **\$40.00** is to be included with the below figures.

1st. Time Registration \$40 1 Year Registration - \$75 2 Year Registration - \$100

Date _____

Registration Fee \$ _____

Plumber’s Name: _____

Business Name: _____

Home Address: _____

Business Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Bus. Ph: _____ Fax: _____

E-Mail address: _____

E-mail address: _____

Master Plumber License Number: # _____

Date Licensed Issued: _____

(Please provide a copy of your photo license).

Please submit the following information in part A, or if you work alone, please sign part B.

Journeyman’s / Apprentice’s Name, & Last 4 digits of Social Security No. or copy of driver’s License:

A.

1. _____

5. _____

2. _____

6. _____

3. _____

7. _____

4. _____

8. _____

B. There are no journeymen or apprentices that are employed by me. _____

I hereby certify that the information contained in this application is in all respects correct and acknowledge that the filing of false information in this application may be a criminal violation of the laws of the State of New York which may be punishable by fine or imprisonment.

Master Plumber Signature _____

Date _____