



VILLAGE OF ROCKVILLE CENTRE
DEPARTMENT OF
BUILDINGS

110 Maple Avenue, Rockville Centre N.Y. 11550
Office: 516-678-9248 Fax: 516-678-4544

AFFIDAVIT OF RESPONSIBILITY FOR HVAC SYSTEMS, GAS SYSTEMS, AND OIL BURNERS

DATE: _____

SEC: _____ BLK: _____ LOT: _____

REFERENCE: BUILDING PERMIT # _____ PLUMBING PERMIT # _____

LOCATION _____

TYPE OF SYSTEM: STEAM () WARM AIR () RADIANT () HOT WATER ()

TYPE OF FUEL: OIL () NATURAL GAS () PROPANE GAS () ELECTRIC () OTHER _____

STATE OF NEW YORK

COUNTY OF NASSAU ss:

I, _____ being duly sworn, deposes and says that I reside at _____

That I am a: Professional Engineer () Architect () with the authority to sign guarantee for complete applicable systems at the above location.

I hereby certify that the _____ system in the above premises were designed to comply with all requirements of the New York State Building Code and all applicable codes. Further, I have inspected this system and found that the system was installed in compliance with the New York State Fuel Gas Code and the New York State Mechanical Code and the New York State Energy Code and the New York State Building Code.

This affidavit is made to satisfy the Building Department of the Village of Rockville Centre as to the truth of the matters therein contained with the knowledge that the Building Department of the Village of Rockville Centre will rely upon the contents hereof in the issuance of a Certificate of Occupancy.
