



**VILLAGE OF MAMARONECK  
BUILDING DEPARTMENT**

169 Mt. Pleasant Avenue,  
Mamaroneck, NY 10543

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[www.village.mamaroneck.ny.us/building-department](http://www.village.mamaroneck.ny.us/building-department)

**Self-Certification Form**  
**(Pre-Approved Emergency Use Only)**

I, (licensed plumber/electrician name) \_\_\_\_\_ certify that I have inspected the  
water damaged electrical or plumbing equipment at  
(Site address) \_\_\_\_\_ in the Village of Mamaroneck  
and certify that it is safe to operate.

Home/Business Owner Name: \_\_\_\_\_

Home/Business Owner Phone Number: \_\_\_\_\_

Plumber/Electrician Name & Company: \_\_\_\_\_

Plumber/Electrician License Number: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Phone Number: \_\_\_\_\_

**PLEASE NOTE THIS FORM CANNOT BE SUBMITTED ELECTRONICALLY. Please deliver  
in-person to the Building Department along with your license and required insurances.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Licensed Plumber/Electrician