

**Town of Shelter Island  
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## **Application for Irrigation Contractor License**

**1.) Name, street address and phone number, cell phone number and EMAIL ADDRESS of applicant:(If corporation, list principal officers, stockholders and directors)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone-office-cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**2.) Trade name of business (if applicable):**

\_\_\_\_\_

**3.) Shelter Island Home Improvement Contractor's License Number:** \_\_\_\_\_

**4.) List names and addresses of all employees in your firm dealing with irrigation:**

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

**5.) I hearby state that all above listed employees have read and understand the applicable town code.**

\_\_\_\_\_ (owner signature)

**6.) The applicant/business must be financially responsible. The applicant must have a liability policy for minimum \$300,000. Applicant must also have a Restricted Plumbers Irrigation License issued by Suffolk County.**

**The information is attached**

**I understand that holding this license carries important responsibilities to ensure that irrigation in the Town of Shelter Island is done responsibly and efficiently.**

**I understand that each property owner must have a valid irrigation permit (issued annually and subject to a 90 day suspension if improperly operated) before I or my company may operate an irrigation system on the property.**

**I understand that the building inspector may suspend an irrigation contractor license for up to 30 days for an irrigation-operation violation. He may also revoke the license for a year for (1) an illegal installation or (2) a fraudulent certification violation.**

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Irrigation Contractor License # (to be issued by Building Department)** \_\_\_\_\_