



**APPLICATION FOR COMMERCIAL BUILDING PERMIT**

Permit Number: _____		Submittal Date: _____	
Date Approved: _____		By: _____	
		Fee \$: _____	
Construction Address: _____		Zoning: _____	
Subdivision: _____		Lot: _____	
		Block: _____	
		STR: _____	
<b>PERMIT TYPE</b> (please circle) New Construction Fire Repair Building Addition Retaining Wall (onsite) Tenant Finish Interior Remodel		<b>SITE PLAN REVIEW</b> Expedited: <u>Yes/No</u> Submittal Date: _____ Approval Date: _____	
If <u>new construction</u> , size of the required water meter (please circle): 5/8"    1"    1 1/2"    2"    3"    Other _____			<i>Official Use:</i> Meter Tap Fee: _____ Sewer Tap Fee: _____ W/Waste Fee: _____
Sewer service line (please circle): 4"    6"    8"    10"    12"    Other _____			
<b>ARCHITECT/ENGINEER</b> Name _____ Email Address _____ Address _____ City, State & Zip _____ Phone _____ Fax _____			
<b>CONTRACTOR/APPLICANT</b> Name _____ Email Address _____ Address _____ City, State, & Zip _____ Phone _____ Fax _____			
<b>PROPOSED COMMERCIAL USE</b> (please circle) Amusement/Recreational    Church/Religion    Industrial    Parking Garage Service/Repair Garage    Hospital/Institution    Mercantile    Public Utility Office, Bank, Professional    School, Library    Tanks (fuel)    Tower (cell, etc.) Hotel, Motel, Dormitory    Triplex or greater    Restaurant    Other _____			
Describe in detail the proposed use of the building. If use of an existing building is being changed, enter the proposed use: _____ _____ _____ _____			

<p><b>PRINCIPLE FRAMING</b></p> <p>Foundation _____</p> <p>Exterior Walls _____</p> <p>Interior Walls _____</p> <p>Fire Wall/Barriers _____</p> <p>Roof Structure _____</p> <p>Roof Decking _____</p> <p>Roof Covering _____</p> <p>Is the building being sprinkled? _____</p> <p>If yes, to what standard? _____</p> <p>_____</p>	<p><b>BUILDING INFORMATION</b></p> <p>Height of Building _____</p> <p>Number of Stories _____</p> <p>Total square footage _____</p> <p>Total square footage of remodel _____</p> <p>Total Estimated Cost _____</p> <p><b>NUMBER OF PARKING SPACES</b></p> <p>Enclosed _____</p> <p>Outdoors _____</p> <p>Accessible _____</p>
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**APPLICANT INFORMATION**

Owner(s)/Lessee(s) \_\_\_\_\_

Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

*I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws and jurisdictions.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACTOR INFORMATION**

General Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Mechanical \_\_\_\_\_ Phone \_\_\_\_\_

Electrical \_\_\_\_\_ Phone \_\_\_\_\_

Plumbing \_\_\_\_\_ Phone \_\_\_\_\_

Elevator \_\_\_\_\_ Phone \_\_\_\_\_

**REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF OCCUPANCY:**  
 Submit a copy of the new business Sales Tax Permit from the Oklahoma Tax

**NOTE:** Upon approval of all final inspections, please call the Community Development Department at (918) 322-5409 to request the Certificate of Occupancy. Please provide your permit number and the property address.