

**CITY OF GLENPOOL
APPLICATION FOR COMMERCIAL BUILDING PERMIT**

Permit Number _____ Date _____

Date Approved _____ By _____ Fee \$ _____

Construction Address _____	Zoning _____
Subdivision _____	Lot _____ Block _____ S-T-R _____

<p align="center">PERMIT TYPE (please circle)</p> <p>New Construction Plumbing Fire Repair Mechanical Building Addition Electrical Retaining Wall (onsite) Other (specify) _____ Tenant Finish _____ Interior Remodel _____</p>	<p align="center">SITE PLAN</p> <p>Expedited: <u>Yes/No</u> _____</p> <p>Submittal Date: _____</p> <p>Approval Date: _____</p>
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If new construction, give the size of the required water meter (please circle):
 5/8" 1" 1 1/2" 2" 3" Other _____

Sewer line (please circle):
 4" 6" 8" 10" 12" Other _____

ARCHITECT/ENGINEER

Name _____
 Address _____
 City, State & Zip _____
 Phone _____ Fax _____

CONTRACTOR/APPLICANT

Name _____
 Address _____
 City, State, & Zip _____
 Phone _____ Fax _____

PROPOSED COMMERCIAL USE (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 (e.g. food processing plant, machine shop, laundry building at a hospital, elementary school, college, parochial school, parking garage for department store). If use of an existing building is being changed, enter the proposed use: _____

PRINCIPLE FRAMING Foundation _____ Exterior Walls _____ Interior Walls _____ Fire Wall/Barriers _____ Roof Structure _____ Roof Decking _____ Roof Covering _____ Is the building being sprinkled? _____ If yes, to what standard? _____ _____	BUILDING INFORMATION Height of Building _____ Number of Stories _____ Total square footage _____ Total square footage of remodel _____ Total Estimated Cost \$ _____ NUMBER OF PARKING SPACES Enclosed _____ Outdoors _____ Accessible _____
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APPLICANT INFORMATION	
Owner(s)/Lessee(s) _____	City, State & Zip _____
Address _____	E-Mail Address _____
Phone _____	
<p><i>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.</i></p>	
Applicant Signature _____	Date _____

CONTRACTOR INFORMATION	
General Contractor _____	
Mechanical _____	
Electrical _____	
Plumbing _____	
Elevator _____	

NOTE: Upon approval of 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.