



BUILDING PERMIT APPLICATION

Project Address:	Date
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Property Owner's Information:

Name:	Home #	Cell #	
Address:	City	State	Zip

Contractor's Information:

Business Name:	Office #	Fax #	
Contact Person:	Title	Cell #	
Address:	City	State	Zip

Insurance Carrier	Phone Number
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MEP Contractors

Mechanical: Name and Phone Number	#Tons	License #
Electrical: Name and Phone Number	# Amps and Circuits	License#
Plumbing: Name and Phone Number	#Fixtures	License #

Land Use Information:

Zoned:	Existing Use	Proposed Use	Estimated Cost	Square Footage	Water PSI Needed
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Permit Information:

Please only circle one. ERECT REMODEL ADD ON MOVE ON INSTALL MODULAR FIRE RESTORATION FOUNDATION DEMOLISH/REMOVE

I understand that I am responsible for ensuring that all applicable sales and use taxes are paid for all materials purchased. I also understand that I will be required to submit documentation to the Community Development Department showing proof of payment, either to the vender or directly to the Oklahoma Tax Commission. Certificate of Occupancies will not be issued until such documentation has been received and verified.

I hereby certify that statements in this application and the attachments hereto are true and correct and that the property owner has given permission for this work to proceed. I further certify that all construction work done under this permit will conform to the attached plans, specifications and drawings and to the Code of Ordinances of the City of Durant and that all electrical, plumbing, mechanical, fence, sign and driveway construction shall be performed by contractors licensed by the state of Oklahoma and City of Durant (if applicable)

Owner or Contractor Signature: _____

Community Development Director: _____
Signature certifies that the above address meets all zoning and other code requirements.