

# Building Permit Application

Permit # \_\_\_\_\_



**The City of  
CHICKASHA**  
COMMUNITY DEVELOPMENT DEPARTMENT

<b>FLOODPLAIN</b>	<b>YES</b> <input type="checkbox"/> <b>NO</b> <input type="checkbox"/>
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(PLEASE PRINT)

<b>Project Address:</b>						
Legal Description	Lot #	Block #	Subdivision:	<input type="checkbox"/> Attach additional sheet if metes and bounds or split lots		
<b>Owner of Property:</b>						
Name _____				Phone # _____		
<b>Mailing Address:</b>						
Street # _____		City _____		State _____	Zip _____	
<b>Contractor/Applicant:</b>						
Name _____				Phone # _____		
<b>Mailing Address:</b>						
Street # _____		City _____		State _____	Zip _____	
Existing Use of Land/Bldg:	Proposed Use of Land/Bldg:	Number of Units	Number of Stories	Overall Height	Estimated Cost	Square Footage
Permit Information	(Please check only one. If more than one applies, list in remarks below)					<input type="checkbox"/> Modular <input type="checkbox"/> Foundation Only <input type="checkbox"/> Demolish/Remove
	<input type="checkbox"/> New Construction	<input type="checkbox"/> Remodel	<input type="checkbox"/> Fire Restoration			
	<input type="checkbox"/> Add on	<input type="checkbox"/> Move on	<input type="checkbox"/> Install			
Service Information	Water Supply	HVAC Type/Size (Tons / BTU)		Sewer Type		Electric Service/Size (Amps)
	<input type="checkbox"/> Well	<input type="checkbox"/> Electric _____		<input type="checkbox"/> Septic System		<input type="checkbox"/> Above Ground _____
	<input type="checkbox"/> City	<input type="checkbox"/> Gas _____		<input type="checkbox"/> City		<input type="checkbox"/> Underground _____
	<input type="checkbox"/> Other	<input type="checkbox"/> Other _____		<input type="checkbox"/> Other		<input type="checkbox"/> Other _____

(All Other Boxes Checked Must be explained in the Remarks Section)

Applicant Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Check here to have Occupancy Certificate mailed to Contractor/Applicant.**

I hereby certify that the 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 under this permit will conform to the attached plans, specifications and drawings and to the Codes and Ordinances of the City of Chickasha and that all electrical, plumbing, heat & air, fence, sign and driveway construction shall be performed by contractors licensed by the State of Oklahoma (if applicable) and registered with the City of Chickasha.

Date \_\_\_\_\_ Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Fill in all applicable information (Check primary contract person)

<input type="checkbox"/>	Owner _____	Phone # _____	Fax # _____
<input type="checkbox"/>	Contractor _____	Phone # _____	Fax # _____
<input type="checkbox"/>	Architect/Designer _____	Phone # _____	Fax # _____
<input type="checkbox"/>	Engineer _____	Phone # _____	Fax # _____