



# SAFE ROOM PERMIT APPLICATION PACKET

**Community Services**  
**405-670-7314**  
3701 SE 15th Street  
Del City OK 73115  
[www.cityofdelcity.com](http://www.cityofdelcity.com)  
Fax: 405-670-7368

## APPLICATION CHECKLIST

- |       |                              |               |
|-------|------------------------------|---------------|
| _____ | Signed Application           |               |
| _____ | Plot Plan                    | (1 Paper Set) |
| _____ | Plot Plan                    | (Electronic)  |
| _____ | Structural Plan              | (1 Paper Set) |
| _____ | Structural Plan              | (Electronic)  |
| _____ | Applicant Certification      |               |
| _____ | Property Owner Certification |               |

The construction drawings electronic version may be submitted either by CD, DVD, or email PDF at [lmccann@cityofdelcity.org](mailto:lmccann@cityofdelcity.org).

**FOR STAFF USE ONLY:**

<b>Code</b>	_____	<b>DATE SUBMITTED:</b>	_____
<b>Zoning</b>	_____	<b>ENTERED INCODE BY:</b>	_____
<b>Floodplain</b>	_____	<b>PERMIT APPROVED:</b>	_____
<b>Stormwater</b>	_____	<b>DUE: \$</b>	_____
<b>Drainage</b>	_____	<b>RECEIPT NO.</b>	_____
<b>Public Works</b>	_____		
<b>Fire Department</b>	_____		
<b>Inspections</b>	_____		



# SAFE ROOM PERMIT APPLICATION

## INSTRUCTIONS

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***All applications must be completed in full, including all required supporting documentation.*** Incomplete applications may be returned to the applicant, leading to substantial delay in processing.

**Be sure to read these instructions carefully before proceeding!**

**Application Form:**

1. Be sure to complete the form in its entirety.
2. The project description should be as specific as possible.

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**Site Plan:**

A site plan is required, showing the location of the proposed safe room along with all structures on the lot. Distances to property lines and structures must be shown.

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**Contractors:**

1. Storm Shelter contractors must be licensed with the City of Del City.
2. Storm Shelter contractors must be bonded.
3. The bond must be renewed annually in the amount of two thousand (\$2,000.00) dollars, in favor of the City.
4. All plans and specifications submitted for approval must bear the signature and seal of a registered professional engineer along with a statement that the structure meets the design requirements.
5. Permits are obtained directly by the Contractor and Contractors must call for inspection.

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**Adopted City Codes:**

The City's current Adopted codes and standards include:

2015 International Residential Code	2015 International Property Maintenance Code
2015 International Mechanical Code	2015 International Plumbing Code
2015 International Fuel Gas Code	2015 International Existing Building Code
2015 International Private Sewage Disposal Code	2015 International Pool and Spa Code
2014 NFPA 70: The National Electrical Code	2015 International Energy Conservation Code
2015 International Fire Code	2015 International Wildland-Urban Interface Code
2015 NFPA 101 Life Safety Code	2015 NFPA 13/13D/13R & NFPA 72

Additional requirements can be found in Chapter 5 of the Del City Code of Ordinances, accessible at <http://www.municode.com> and within the Del City Planning and Zoning Ordinance (site design, parking, etc.).

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\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE



# STORM SHELTER / SAFE ROOM PERMIT APPLICATION

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3701 SE 15th Street

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## **PROPERTY INFORMATION:**

Property Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Owner Contact: Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Property Owner E-Mail Address: \_\_\_\_\_

## **APPLICANT / CONTRACTOR INFORMATION:**

Contractor Name: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor Contact: Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Contractor E-mail Address: \_\_\_\_\_

## **PROJECT INFORMATION:**

Location:  Back Yard  Front Yard  In Garage Floor  Side Yard

Above Ground\*\* (Please see instructions)  Below Ground

Estimated Project Cost: \_\_\_\_\_ Project Square Footage: \_\_\_\_\_ Overall Acreage: \_\_\_\_\_

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

## **PLOT PLAN**

\*\*\* Show all Buildings, Easements, Setbacks, and Lot Line Dimensions

I hereby certify that the above site/plot plan shows all existing and proposed improvements on this property:

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Signature

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Date

**APPLICANT CERTIFICATIONS**

I certify that this permit application is complete and accurate, to the best of my knowledge. \_\_\_\_\_ (initial)

I understand that, by submitting this application, I agree to comply with all adopted codes and applicable laws/ordinances. \_\_\_\_\_ (initial)

I understand that inspections are required as provided for in the City's adopted codes, that inspections must be arranged at least 48 hours in advance, that inspections are scheduled and performed on the basis of need and based on the nature of the work being inspected, and that failed inspections may lead to re-inspection fees. \_\_\_\_\_ (initial)

*I hereby submit this application for a Storm Shelter / Safe Room Permit.*

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE



**PROPERTY OWNER CERTIFICATION**

I certify that the applicant has my authorization to submit this building permit application. I certify that I understand that as the Property Owner, I am ultimately responsible for any work done on the premises. \_\_\_\_\_ (initial)

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

\_\_\_\_\_  
DATE