



PERMIT APPLICATION

**Community
Development**
405-670-7314
3701 SE 15th Street
Del City, OK 73115
www.cityofdelcity.gov
permits@cityofdelcity.org

APPLICANT NAME: _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

PHONE NUMBER: _____ **E-MAIL:** _____

COMPANY NAME: _____

PLEASE CHECK THE PERMIT(S) BOXE(S) YOU ARE APPLYING FOR:

PLUMBING PERMIT ELECTRICAL PERMIT MECHANICAL PERMIT

1. MUST HAVE A VALID CONTRACTOR LICENSE WITH THE STATE OF OKLAHOMA.
2. MUST HAVE A VALID CONTRACTOR LICENSE WITH THE CITY OF DEL CITY.
3. THE CITY OF DEL CITY REQUIRES EVERYONE ON THE JOBSITE TO HAVE A VALID LICENSE WITH THE CITY OF DEL CITY.

PROPERTY ADDRESS:

DETAILED DESCRIPTION OF WORK TO BE PERFORMED:

PERMITS ARE VALID FOR 180 DAYS UPON ISSUANCE AND BECOME NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT READY FOR INITIAL INSPECTION WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 30 DAYS ANY TIME AFTER WORK COMMENCES.

I AGREE TO COMPLY WITH ALL CITY ORDINANCES AND APPLICABLE COUNTY OR STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE-MENTIONED PROPERTY FOR INSPECTION PURPOSES.

APPLICANT SIGNATURE: _____

DATE: _____