

**PLUMBING PERMIT
 APPLICATION**

OFFICE USE ONLY

Cash	<input type="checkbox"/>
Check	<input type="checkbox"/>
Prepaid	<input type="checkbox"/>
Received \$	_____
Date:	_____
Receipt No.	_____

Permit No. _____

BUSINESS NAME

BUSINESS ADDRESS

Street

City

State

Zip

Phone

Fax

Pager

PROJECT ADDRESS

Street

Property Owner/Resident

Phone

SERVICE/CONSTRUCTION TYPE

- | | | | |
|------------------------|--------------------------|------------------------|--------------------------|
| Gas Service | <input type="checkbox"/> | Gas Line Extension | <input type="checkbox"/> |
| Gas Line Replacement | <input type="checkbox"/> | Lawn Sprinkler | <input type="checkbox"/> |
| New Water Service | <input type="checkbox"/> | Water Line Replacement | <input type="checkbox"/> |
| New Sewer Service | <input type="checkbox"/> | Sewer Line Replacement | <input type="checkbox"/> |
| Water Heater | <input type="checkbox"/> | New Fixtures (Add-on) | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | | |
| Building Permit issued | <input type="checkbox"/> | not needed | <input type="checkbox"/> |

I hereby certify that the statement 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 Choctaw and that all electrical, plumbing and heat & air construction shall be performed by contractors licensed by the State of Oklahoma and licensed with the City of Choctaw.

Printed Name: _____

Applicant's Signature: _____ Date: _____