



Choctaw

Date Recorded: _____ Permit # _____
RESIDENTIAL - BUILDING PERMIT APPLICATION

Physical Address/Intersection:		Name of Project:		Within a NFIP 100/500yr Floodzone: YES NO	
Sec., Township, Range/Subdivision:		Acres/Block:	Lot(s):	Applicant/Owner Phone Number:	
Applicant/Owner:			Applicant/Owner E-mail:		
Mailing Address:		City:	State:	Zip:	
General Contractor's Name	Gen. Contractor's Phone Number	Gen. Contractor's Mailing Address & Zip		VALUATION (PARTS AND LABOR)	

CLASS OF WORK	STRUCTURE USE	INSTALLATION <small>(Mark that apply)</small>	WORK DESCRIPTION	
<input type="checkbox"/> NEW	<input type="checkbox"/> Single Family	<input type="checkbox"/> Water Well	<input type="checkbox"/> Wood Frame/Brick Veneer	<input type="checkbox"/> Metal Frame/Brick Veneer
<input type="checkbox"/> ADDITION	<input type="checkbox"/> Duplex	<input type="checkbox"/> Septic	<input type="checkbox"/> Wood Frame/Other Siding	<input type="checkbox"/> Metal Frame/Other Siding
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Security	<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Solid Concrete
<input type="checkbox"/> REMODEL/REPAIR	<input type="checkbox"/> 3 to 4 Family	<input type="checkbox"/> Pool	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Attached <input type="checkbox"/> Detached
<input type="checkbox"/> FIRE RESTORATION	<input type="checkbox"/> Multi-Family (5+ Units)	<input type="checkbox"/> Sign	Structural Assemblies Fabricated Off-Site	
<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> Accessory	<input type="checkbox"/> Lawn Sprinkler	YES	NO
<input type="checkbox"/> MOVE ON	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Fence	Under Roof Area:	
<input type="checkbox"/> BURN OUT		<input type="checkbox"/> Safe Room/ Storm Shelter	Lower: _____ ft ²	# of Bedrooms: _____
DRIVEWAY SPEC.			Upper: _____ ft ²	# of Bath: _____
<input type="checkbox"/> NEW	<input type="checkbox"/> REPAIR	<input type="checkbox"/> ADDITION/ALTERATION	Lot size: _____ ft ²	# of Rooms: _____
Driveway Width _____ ft	<input type="checkbox"/> Installation of Tinhorn		# of Units _____	# of garage: _____
Driveway Thickness _____ ft	Tinhorn Size: _____ in.		# of Stories: _____	Garage Area: _____ ft ²
<input type="checkbox"/> Asphalt	<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete	Height: _____	# of Accessory: _____
		<input type="checkbox"/> Galvanized		Accessory: _____ ft ²

Mechanical Sub-Contractor's Name	Mechanical Contractor's Phone #	Mechanical Contractor's Mailing Address	Oklahoma Contractor's License #
Electrical Sub-Contractor's Name	Electrical Contractor's Phone #	Electrical Contractor's Mailing Address	Oklahoma Contractor's License #
Plumbing Sub-Contractor's Name	Plumbing Contractor's Phone #	Plumbing Contractor's Mailing Address	Oklahoma Contractor's License #

Architect Name	Architect Phone #	Architect Mailing Address	Oklahoma Architectural License #
Structural Engineer Name	Structural Engineer Phone #	Structural Engineer Mailing Address	Oklahoma Engineering License #

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 to the Codes and Ordinances of the City of Choctaw. All Electrical, Mechanical, and Plumbing will be performed by license contractors with the State of Oklahoma and the City of Choctaw. I certify that the code official or the code official's authorized representative shall have the authority to enter area covered by such permit at any hour to enforce the provisions of the code(s) applicable to such permit.

NOTICE
 A minimum 48-hour review period begins at 9:00 a.m. on the day following receipt of this application. No work shall be performed, nor any accepted until a permit has been issued.

Applicant Signature:	Applicants Name (Print):	Date:
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I hereby agree to a \$300 Contractors Occupancy Agreement Deposit. The deposit is refundable if there is **NO OCCUPANCY** prior to the issuing of a Certificate of Occupancy. I hereby certify that as my condition for the issuance of a Certificate of Occupancy, _____

(Initials)

Prior to issuance of a building permit, the following site plan items should be submitted to the office of City of Choctaw with an application for a building permit. After receiving all of the necessary items, the review period shall begin.

Two (2) copies of the complete sets of plans are to be submitted to the City of Choctaw for the permit application.

NOTE: Mirrored or flipped plans will not be accepted

FOUR (4) DWELLING UNITS AND BELOW

- (1) A site plan containing the following:
- (a) All lot lines and lot dimensions
 - (b) All existing and proposed buildings
 - (c) Distances between lot lines and buildings (*existing and proposed*)
 - (d) Driveways with dimension
 - (e) Neighboring Driveways
 - (f) All existing and proposed utilities
 - (g) All existing and proposed easement(s) and right(s) of way with dimensions
 - (h) Building set back lines with dimensions
 - (i) Land Clearing Controls
 - (j) Drainage flow arrows
 - (k) Drainage facilities
 - (l) 100 and 500 year flood zone boundary
 - (m) Scale, North Arrow, Date, Contact information
 - (n) Address of project
 - (o) Landscaping
- (2) A floor plan of the building containing the following:
- (a) All exterior walls and dimensions
 - (b) All interior partitions (*Label use of all rooms*)
 - (c) Foundation
 - (d) Footer Detail
 - (e) Building Elevations
 - (f) Ceiling Joist Plan (*size, span, space*)
 - (g) Rafter Plan (*size, span, space*)
 - (h) Manufactured/Engineered Lumber (*If applicable*)
 - (i) Location of breaker box, meter box, & 220 outlets
 - (j) Location of hot water heater, water stub-in, sewer stub-in, & gas stub-in
 - (k) Location of HVAC unit, condenser unit, & return vents
 - (l) Location of the address signage. (*mailbox, structure, curb, etc.*)
- (3) Documentation
- (a) Warranty Deed
 - (b) Copy of Perk Test (*If applicable*)
 - (c) Execute Easement (*If applicable*)
 - (d) Road Cut/Bore Permit (*If applicable*)
 - (e) Ground Clearing Permit
 - (f) Asbestos Report (*If applicable*)
 - (g) Manufactures Designs Layout (*If applicable*)
 - (h) Manufactures Design Data Review (*If applicable*)
 - (i) Engineer Designs (*Oklahoma*) (*If applicable*)

FIVE (5) DWELLING UNITS AND ABOVE

- (1) A scale drawn site plan containing the following:
- (a) All plot lines and lot dimensions
 - (b) All existing and proposed structures
 - (c) Distances between lot lines and buildings (existing and proposed)
 - (d) Driveways with dimension
 - (e) Neighboring Driveways
 - (f) Distances between buildings
 - (g) All required parking spaces and loading areas
 - (h) Driveway approach
 - (i) Neighboring Driveway Approach
 - (j) All existing & proposed utilities
 - (k) All existing and proposed utility easements and right of way with dimensions
 - (l) Building set back lines with dimensions
 - (m) Scale, North Arrow, Date, Contact information
 - (n) Address of project
 - (o) Landscaping
- (2) A scale Architectural/Engineered drawn plan of the building containing the following:
- (a) All exterior walls and dimensions
 - (b) All interior walls and partitions
 - (c) Building mechanical drawings
 - (d) Building electrical drawings
 - (e) Building plumbing drawings
 - (f) Foundation Plan
 - (g) Building Elevations
 - (h) Ceiling Joist Plan*
 - (i) Structural Plan
 - (j) Parking Design and Details
 - (k) Driveway Design
- (4) Engineered drainage plan.
- (a) Finished floor elevations
 - (b) Proposed and existing routing of drainage water showing all drain ways, curbs, retaining walls, etc.
 - (c) Engineering calculations (*100 year flood event*)
 - (d) Land Clearing Controls
 - (p) Drainage flow arrows
 - (q) 100 and 500 year flood zone boundary
- (5) Documentation
- (1) Warranty Deed
 - (2) Copy of Perk Test (*If applicable*)
 - (3) Execute Easement (*If applicable*)
 - (4) Road Cut/Bore Permit (*If applicable*)
 - (5) Ground Clearing Permit
 - (6) Asbestos Report (*If applicable*)
 - (7) Manufactures Designs (*If applicable*)
 - (8) Engineer Designs (*Oklahoma*) (*If applicable*)

* NOTE: *Ceiling Joist Plan (Manufactured)*

- Layout Design
- Products Chart
- Title Block

- Blocking Chart
- Framing Connectors Summary Chart
- Certificate Documentation

- Signature of Designer (**Blue Ink**)

Project Address: _____ Applicant Phone # _____

Applicant Name: _____ Permit # _____



A large rectangular area filled with a fine grid pattern, intended for drawing or technical specifications.

CONSTRUCTION POLICIES AND PROCEDURES

The City staff will complete all inspections request within forty-eight (48) hours. In order to provide consistent and efficient service to all contractors, these policies and procedures will be followed:

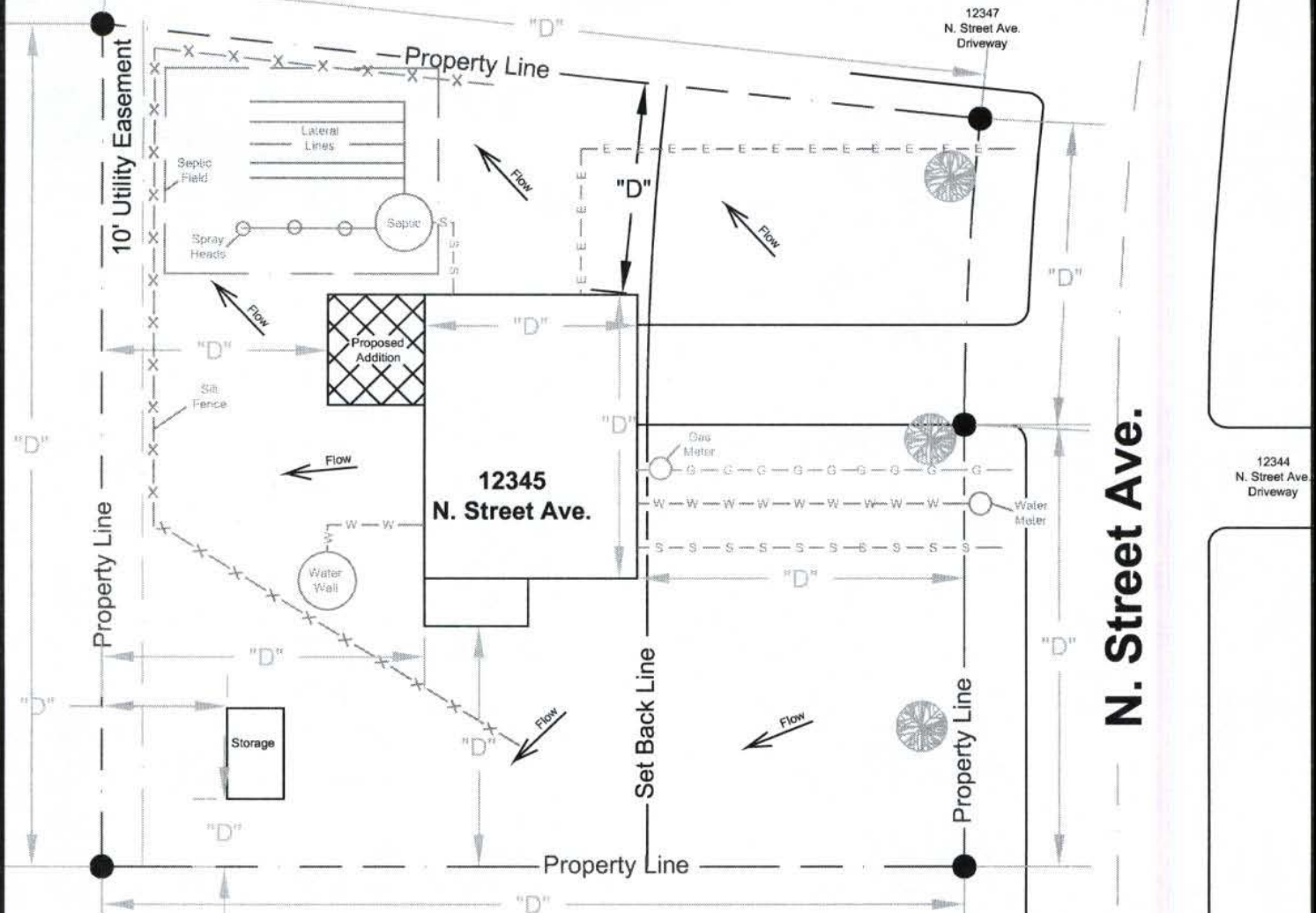
- Accurate construction plans must be submitted for permit approval. No reversed or partial plans are accepted. Construction may begin only after the appropriate permit is issued.
- Mechanical/Electrical/Plumbing permits will be issued to licensed contractors only. Contractor must hold current State of Oklahoma and City of Choctaw licenses.
- Only licensed contractors may call and request inspections with the City of Choctaw. The construction address is needed to log an inspection request.
- Re-inspections will be made but an additional charge of \$25.00 will be assessed if inspections called in are not actually ready to be inspected, as determined by the building inspector.
- All fees will be paid before a building permit is issued and/or building inspection is performed.
- Partial inspections may be performed if arrangements are made in advance with the building department.
- All inspections must be made and approved before anything is covered up. This is the permit holder's responsibility.
- The building permit sign will be posted on the job site and visible from the street.
- Concrete washouts and trash containers will be on site to maintain the construction site of any rubbish.
- Portable toilets must be available to the construction site. (Maximum – 1 per 2 lots/1 every 330 ft)
- Final inspections will be made only when the building is complete, including driveways, sidewalks, light fixtures, carpets, address posted, landscaping, post-construction erosion controls, elevation certificate, etc.
- Certificate of Occupancy will be issued after all finals are complete. Occupying the structure is prohibited unit such time.
- All permits issued are valid for six (6) months form date of issuance. The building official may grant an extension upon a request from the permit holder.

RESIDENTIAL FEE STRUCTURE

(Non-Refundable)

• Site Plan Review	\$.03 sqft
• Building Permit Fee	\$.07 sqft
• Zoning Clearance Permit	\$	25.00
• Driveway Permit	\$	25.00
• Fence Permit	\$	25.00
• Sprinkler Permit (an additional plumbing permit paid by the plumbing contractor)		
• State of Oklahoma Fee	\$	4.50
• Emergency Siren Fee	\$	25.00
• Water and Sewer Fees		
○ Each water meter connection to an existing tap	\$	150.00
○ Each water meter connection with a new tap	\$	225.00
○ Street Bore (will be billed separately)		Actual Cost
○ Utility Deposit	\$	40.00
○ Inspection fee for repair of existing sewer tap	\$	25.00
○ Each sewer connection to main line 3 years or older	\$	150.00
○ Each sewer connection to main line 3 years of less	\$	300.00

SAMPLE SITE PLAN



LEGEND

	Drainage Flow Arrow
	Silt Fence (Erosion Control)
	Natural Gas Service Line
	Water Service Line
	Sanitary Sewer Service Line
	Electrical Service Line
	Tree

John Doe
(405) 555-5555
Jan. 1, 20XX



CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> Address | <input type="checkbox"/> Driveway |
| <input type="checkbox"/> Street Name(s) | <input type="checkbox"/> Neighboring Driveway |
| <input type="checkbox"/> Property Line w/Dimensions | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Structure(s) w/Dimensions | <input type="checkbox"/> Drainage Flow Arrows |
| <input type="checkbox"/> Setback lines | <input type="checkbox"/> Erosion Controls |
| <input type="checkbox"/> Existing/Proposed Utilities | <input type="checkbox"/> Flood Zone Boundary (if applicable) |
| <input type="checkbox"/> Water Service | <input type="checkbox"/> Retaining Wall(s) |
| <input type="checkbox"/> Water Well | <input type="checkbox"/> Scale |
| <input type="checkbox"/> Sanitary Sewer Service | <input type="checkbox"/> North Arrow |
| <input type="checkbox"/> Septic System | <input type="checkbox"/> Date |
| <input type="checkbox"/> Electrical Service | <input type="checkbox"/> Contact Information |
| <input type="checkbox"/> Natural Gas Service | |

PLEASE
USE BLANK PAGE
ON BACK TO
DESIGN A SITE
PLAN