

RESIDENTIAL BUILDING PERMIT APPLICATION



APPLICANT INFORMATION

APPLICANT/COMPANY:	CONTACT:
ADDRESS:	CITY/ST/ZIP:
PHONE:	EMAIL:

PROJECT INFORMATION

TYPE OF PROJECT (CHECK ONE):

- NEW CONSTRUCTION
 ADDITION (DETACHED STRUCTURE)
 ALTERATION (INTERIOR)
 ALTERATION & ADDITION (ADDING TO EXISTING STRUCTURE)

LOCATION & SCOPE OF WORK

PROJECT ADDRESS:	SUBDIVISION:	LOT & BLOCK:			
PROJECT COST: \$	CONSTRUCTION TYPE:	SQ. FT:	GARAGE SQ. FT:	EXISTING SQ. FT:	NO. FLOORS:

ALTERATION AND/OR ADDITION:

SCOPE OF WORK:
(PLEASE BE SPECIFIC)

UTILITY INFORMATION

NEW CONSTRUCTION

TYPE OF WATER METER:	<input type="checkbox"/> NEW <input type="checkbox"/> EXISTING <input type="checkbox"/> N/A	SIZE OF WATER METER:	<input type="checkbox"/> 5/8" <input type="checkbox"/> 1" <input type="checkbox"/> 1½" <input type="checkbox"/> 2" <input type="checkbox"/> N/A
WATER METER INSTALL:	<input type="checkbox"/> CITY <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> N/A	SIZE OF IRRIGATION METER:	<input type="checkbox"/> 5/8" <input type="checkbox"/> 1" <input type="checkbox"/> 1½" <input type="checkbox"/> 2" <input type="checkbox"/> N/A

UTILITY SERVICE

<input type="checkbox"/> EDMOND WATER	<input type="checkbox"/> WELL	GATED SUBDIVISION OR GATED DRIVE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> EDMOND ELECTRIC	<input type="checkbox"/> OG&E	FIRE SPRINKLER/SUPPRESSION SYSTEM?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> EDMOND SEWER	<input type="checkbox"/> SEPTIC <input type="checkbox"/> AEROBIC	STORM SHELTER/SAFE ROOM?	<input type="checkbox"/> YES <input type="checkbox"/> NO

▶ IF YES – COMPLETE AND SUBMIT A SEPARATE STORM SHELTER APPLICATION & REQUIRED PLANS

SUBMITTAL INFORMATION

- ▶ RESIDENTIAL APPLICATIONS REQUIRE ONE FULL SET OF PLANS DRAWN TO SCALE
- ▶ TO PROCESS YOUR PERMIT APPLICATION IN A TIMELY MANNER, IT IS ESSENTIAL TO PROVIDE COMPLETE AND ACCURATE INFORMATION.
- ▶ PLEASE USE THE CHECKLIST BELOW TO VERIFY ALL PLAN REQUIREMENTS AND DOCUMENTS ARE INCLUDED WITH YOUR APPLICATION.
- ▶ ALL DOCUMENTS INDICATED MUST BE SUBMITTED FOR AN APPLICATION TO BE ACCEPTED AND SUBSEQUENTLY REVIEWED. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

PLAN INFORMATION

DIMENSIONED PLOT PLAN <ul style="list-style-type: none"> PROJECT ADDRESS LOCATION & DIMENSIONS (IN FEET) OF ALL PROPERTY, RIGHT-OF WAY LINES, PUBLIC & PRIVATE EASEMENTS NO LARGER THAN 11 X 17 – NO EXCEPTIONS 	ENGINEERED FOOTING DESIGN <ul style="list-style-type: none"> PROJECT ADDRESS ENGINEER STAMP NO LARGER THAN 11 X 17 – NO EXCEPTIONS
FLOOR PLAN <ul style="list-style-type: none"> ALL ROOMS, DOOR SWINGS, WINDOWS, EXISTING WALLS, PROPOSED WALLS AND DEMOED WALLS 	ELEVATION <ul style="list-style-type: none"> VERTICAL VIEW OF STRUCTURE & PITCH SIZE
SCOPE OF WORK <ul style="list-style-type: none"> WRITTEN DESCRIPTION OF PROPOSED WORK (ABOVE) 	DEQ FORM FOR SEPTIC OR AEROBIC SYSTEM (IF APPLICABLE) <ul style="list-style-type: none"> MUST PROVIDE SIGNED DEQ FORM 647-5815P
GENERAL LIABILITY & WORKERS COMP <ul style="list-style-type: none"> CONTRACTORS & BUILDERS ONLY 	DEED FOR UNPLATTED ADDRESS <ul style="list-style-type: none"> MUST BE COUNTY STAMPED

PLAN REVIEW CHECKLISTS	PLOT PLAN	FLOOR PLAN	FOOTING	ELEVATION	SCOPE OF WORK	DEQ FORM	GL & WC	DEED
NEW CONSTRUCTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ALTERATION • PLANS – NO LARGER THAN 11 X 17 – NO EXCEPTIONS	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	N/A
ADDITION OR ALTERATION & ADDITION • PLANS – NO LARGER THAN 11 X 17 – NO EXCEPTIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BUILDING(S) CANNOT BE OCCUPIED WITHOUT A CERTIFICATE OF OCCUPANCY ISSUED BY THE BUILDING & FIRE CODE SERVICES DEPARTMENT.
 BY SIGNING THIS FORM, YOU ACKNOWLEDGE THE BUILDING PLANS SUBMITTED COMPLY WITH ALL REQUIREMENTS, APPLICABLE CODES, AMENDMENTS AND ORDINANCES SET FORTH BY THE EDMOND CITY COUNCIL.

APPLICANT SIGNATURE: _____ DATE: _____