BUILDING PERMIT APPLICATION

City of Comanche
Planning & Zoning Department
500 N Rodeo Dr
Comanche, OK 73529
Phone (580) 439-8832, Fax (580) 439-6308
citymanager@cityofcomanche.com

| PERMIT NUMBER |
| RECEIVED BY |
| DATE RECEIVED |

WORK TYPE		
☐ NEW	☐ ADDITION	☐ ALTERATION
☐ REPAIR	☐ RELOCATE	☐ DEMOLITION

DESCRIPTION OF WORK

Valuation Labor & Materials $
Total Square Footage

JOB SITE INFORMATION AND LOCATION
Job Site Address:
City/State/Zip:
Suite/Apartment:
Tax Map/Parcel ID:

☐ OWNER	☐ APPLICANT	☐ CONTACT
Name:		
Address:		
City/State/Zip:		
Phone: ( )		
Email:		

CONTRACTOR(s)	
General:	Phone:
Electrical:	Phone:
Plumbing:	Phone:
HVAC:	Phone:
Other:	Phone:

PERMIT FEES	
Building Permit:	
Roofing Permit:	
Pool Permit:	
Demo Permit:	
Road Closure:	
Moving Permit:	
Inspection Fee:	
Trades Fee:	
Tap/Meter Fee:	
Street Cut Permit:	
Other/Misc:	
	Total	

I certify that all of the information on this application is correct and accurate to the best of my knowledge and I understand that I may not begin any work including demolition or improvements until the building permit is approved, signed and delivered to me. I also understand that it is my responsibility to have all utilities identified and located before any work is done. I further agree that I will adhere to all building codes and other requirements outlines in the Comanche Code of Ordinances. Any work not performed by the property owner will be done by a contractor licensed by the State of Oklahoma and have a valid license with the City of Comanche. Failure to follow these requirements may result in cancelation of this permit.

| Signature of Applicant | Date: |

SPECIAL CONDITIONS

FLOOD PLAIN   ☐ YES   ☐ NO
FIRE ZONE   ☐ YES   ☐ NO

Approved by city council on: _____
Issued by: _____   Date: _____

This permit shall expire 180 days from issuance if not completed or renewed