City of Cordell

101 E. Main St.
Cordell, Ok. 73632
580-832-3825

# PLUMBING PERMIT APPLICATION

☐ Commercial
☐ Residential
Date:_____

CONTRACTOR'S COMPANY NAME: _____

CONTRACTOR'S REPRESENTATIVE NAME: _____

CONTRACTOR'S E-MAIL ADDRESS: _____

BUSINESS PHONE #: _____ STATE LICENSE ##: _____

COMPLETE JOB ADDRESS: _____

BUILDING PERMIT #: _____

CIRCLE THE TYPE OF PERMIT NEEDED:

**RESIDENTIAL**: **NEW CONSTRUCTION** (TOTAL # OF BATHROOMS_____

**ADD-ON** **REMODEL** **MISC**

**COMMERICAL:** **NEW CONSTRUCTION** (LIST FIXTURES BELOW)

**ADD-ON** **REMODEL** **MISC**

**SERVICES:**

(NEW / REPLACE / RELOCATE)

| | | | |
|---|---|---|---|
| CITY WATER | YES / NO | CITY SEWER | YES / NO |
| WATER WELL | YES / NO | SEPTIC SYSTEM | YES / NO |
| WATER EXTENSION | YES / NO | SEWER EXTENSION | YES / NO |
| CONSTRUCTION GAS | YES / NO | GAS SERVICE | YES / NO |
| GAS EXTENSION | YES / NO | GAS METER RE-SET | YES / NO |

**FIXTURES:**

(NEW / REPLACE / RELOCATE)

| | | |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**MOBILE HOME / GAS PERMIT ONLY**

NEW GAS SERVICE / GAS METER RE-SET

**RE-INSPECTION**

ORIGINAL PERMIT #_____

**CIRCLE TYPE OF INSPECTION NEEDED:** **WILL CALL** **GROUND** **ROUGH** **SEWER**

**CONSTRUCTION GAS** **GAS** **WATER** **FINAL**

OTHER INFORMATION_____

**Approved:**_____ **Date:**_____