

Town of Calumet, OK

PLUMBING PERMIT

CONTRACTORS COMPANY NAME: _____

CONTRACTORS REPRESENTATIVE NAME: _____

CONTRACTORS E-MAIL ADDRESS: _____

BUSINESS PHONE # _____ STATE LICENSE # _____

COMPLETE JOB ADDRESS: _____

RESIDENTIAL **COMMERCIAL**

NEW CONSTRUCTION **REMODEL** **MISC.** **ADD-ON**

(TOTAL # OF BATHROOMS _____)

SERVICES:

NEW **REPLACE** **RELOCATE**

TOWN WATER YES NO TOWN SEWER YES NO

WATER EXTENSION YES NO SEPTIC SYSTEM YES NO

CONSTRUCTION GAS YES NO SEWER EXTENSION YES NO

GAS EXTENSION YES NO GAS SERVICE YES NO

GAS METER RE-SET YES NO

LIST FIXTURES BELOW:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER INFORMATION: _____

RECEIVED BY: _____ DATE: _____

\$20.00 FEE PAID BY: CHECK CASH MONEY ORDER CREDIT CARD

BUILDING PERMIT# _____

JOB PERMIT# _____