



# Accessory Building Permit Application

Permit No. \_\_\_\_\_

Official Use Only	
Cash	<input type="checkbox"/>
Check	<input type="checkbox"/> _____
Credit Card	<input type="checkbox"/> _____
Received	_____
Receipt No	_____
Date:	_____

**Project Address:** \_\_\_\_\_

Legal Description	Lot #	Block #	Subdivision: (If un-platted, submit copy of warranty deed)
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**Owner of Property:** \_\_\_\_\_  
 Name \_\_\_\_\_ Phone # \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
 Street # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Contractor/Applicant:** \_\_\_\_\_  
 Name \_\_\_\_\_ Phone # \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
 Street # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Email:** \_\_\_\_\_

Existing Use of Land:	Lot Size:	Sq. Ft.	Flood Zone	Estimated Cost
<input type="checkbox"/> Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial				

**Construction:**  Build/Weld Up  Fabricated Off-Site  Repair/Remodel  Other: \_\_\_\_\_

Materials:	<input type="checkbox"/> Wood Frame/Brick Veneer <input type="checkbox"/> Metal Frame/Brick Veneer <input type="checkbox"/> Wood Frame/Other Siding <input type="checkbox"/> Metal Frame/Other Siding <input type="checkbox"/> Other: _____	<i>All steel structures, regardless of size, require a stamped set of engineered plans, to include engineered footings as needed. If you have any questions please call 405-390-2999 or email: <a href="mailto:inspections@choctawcity.org">inspections@choctawcity.org</a></i>
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**Please Note:**  
 All structures over 200 sq. ft., regardless of type, require a Ground Clearing Permit in addition to this Accessory Structure Permit. Utilities require separate permits. Accessory Structures under 100 sq. ft.: **No Permits Needed.**

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 drawings and to the Codes and Ordinances of the City of Choctaw and that all electrical, plumbing and heat & air construction shall be performed by contractors licensed by the State of Oklahoma and licensed with the City of Choctaw. I attest to the truth and correctness of all facts and information presented in this application and agree to pay all fees as required.

**Printed Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Do Not Write below This Line Official Use Only	
<input type="checkbox"/> APPROVED _____ 20 _____	
<input type="checkbox"/> DENIED _____ 20 _____	
REASON: _____	BY _____

<b>Mechanical Sub-Contractor's Name</b>	<b>Mechanical Contractor's Phone #</b>	<b>Oklahoma Contractor's License #</b>
<b>Electrical Sub-Contractor's Name</b>	<b>Electrical Contractor's Phone #</b>	<b>Oklahoma Contractor's License #</b>
<b>Plumbing Sub-Contractor's Name</b>	<b>Plumbing Contractor's Phone #</b>	<b>Oklahoma Contractor's License #</b>
<b>Structural Engineer Name</b>	<b>Structural Engineer's Phone #</b>	<b>Oklahoma Contractor's License #</b>
<b>Concrete Contractor's Name</b>	<b>Concrete Contractor's Phone #</b>	<b>Oklahoma Contractor's License #</b>
<b>Architect Engineer Name</b>	<b>Architect Engineer's Phone #</b>	<b>Oklahoma Contractor's License #</b>

**How Structure will be secured (ex: posts, blocks, tie downs, piers):**  
 \_\_\_\_\_

**Other Questions:**

Will this structure have utilities?     Yes     No  
 If yes, Contractors registered with the City of Choctaw will need to pull appropriate permits and call in inspections as needed.

A completed application will consist of this permit, a completed site plan, a ground clearing permit if the structure is over 200 sq. ft., a stamped set of engineered plans if it is a steel structure; front, side and rear elevations of structure, floorplan layout if applicable, and if a structure is fabricated off site, a picture or rendering. Incomplete permits will not be processed.

**Accessory Structure Fees:**

All Accessory Structures **under 200 sq. ft.**  
 With No Ground Clearing Permit:  
 \$ 30.00 Building Permit Fee  
 \$ 35.00 Plan Review Fee  
 \$ 5.00 State Permit Fee

All Accessory Structures **over 200 sq. ft.**  
 With Ground Clearing Permit Applicable:  
 \$ .09 sq ft Building Permit Fee  
 \$ 35.00 Plan Review Fee  
 \$ 5.00 State Permit Fee  
 Please see Ground Clearing Permit for Fees

**Required Inspections:**

All Accessory Structures **under 200 sq. ft.**  
 With No Ground Clearing Permit:  
 1 Final Inspection after installation

All Accessory Structures **over 200 sq. ft.**  
 With Ground Clearing Permit Applicable:

<b>Building Inspections:</b>	<b>Utilities:</b> Electrical, Mechanical, Plumbing (If Applicable):
<input type="checkbox"/> Footing/Pier Holes	<input type="checkbox"/> Ground
<input type="checkbox"/> Framing	<input type="checkbox"/> Rough
<input type="checkbox"/> Building Final	<input type="checkbox"/> Final
<input type="checkbox"/> Ground Clearing Final (sod or seed)	

All inspections require a 24 hr.-advanced request sent to email:  
[inspections@choctawcity.org](mailto:inspections@choctawcity.org)  
 Structure not to be occupied until all final building inspections are completed.

# 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**

**SITE PLAN**

