

ELECTRICAL, MECHANICAL, AND PLUMBING WORK PERMIT

Contractor Name _____ Phone (____) _____

State License # _____ Company Name _____

Customer Name _____ Phone (____) _____

Address of Work _____, Guymon

Finding Location _____

Scheduled Date(s) of Job _____ through _____

Please circle type of work preformed

<u>Electrical</u>	<u>Mechanical (circle 2)</u>	<u>Plumbing</u>
New Service	Existing Equipment	Gas Piping
Wiring Extension	New Installation	New Construction
Replacement Wiring	Outside Unit	Remodel
Adding Circuits	Inside Unit	Replace Water Service
Other (explain) _____	Duct Work	Replace Sewer Service
_____	Hood System	Replace Water Heater
_____	Gas Piping	Other (explain) _____
_____	Other (explain) _____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____