**Well & Septic Tank**

**PERMIT APPLICATION**

**Planning Office**
405-878-1666
222 N Broadway Ave
Shawnee OK 74801-6917
FAX: (405) 878-1587
cosinspections@shawneeok.org

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**DATE RECEIVED**
**PERMIT NO.**
**INSPECTOR**

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**WELL PERMIT**

- **□ Irrigation**
- **□ Potable Water Well**

**APPLICANT**

**ADDRESS**
**CITY**
**STATE**
**ZIP**

**TELEPHONE #**
**FAX #**

**EMAIL ADDRESS**

**LOCATION OF JOB**
**HOMEOWNER**

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**STATE WATER WELL DRILLER NAME**
**LICENSE #**

**ELECTRICAL CONTRACTOR**
**LICENSE #**

*(ALL ELECTRICAL WORK MUST BE DONE BY A LICENSED ELECTRICAL CONTRACTOR & PERMIT PULLED)*

I CERTIFY THAT I WILL CONFORM TO THE CITY OF SHAWNEE ORDINANCES, REGULATIONS, AND REQUIREMENTS FOR THIS WORK. I ALSO UNDERSTAND THAT THIS PERMIT MAY BE REVOKED FOR FAILURE TO COMPLY. *(ALL WATER WELL PERMITS REQUIRE PROPER INSPECTIONS.)*

1. Water from such wells shall be used only for domestic irrigation purposes on the premises where the well is located, unless public utility is not available to the property per the City of Shawnee Engineer. And there shall be no interconnection of any kind between such well and the water supply of the City. Any non-domestic usage existing before June 5, 2006, may be continued to the same extent and for the same purposes, but such uses shall not be extended or increased.

2. All wells drilled, deepened, completed, and the operation of such wells, are subject to the inspection and regulation of the City, so as to prevent pollution and/or damage to those water producing sands.

3. All drilling mud must be removed manually and under no circumstances may the drilling mud escape the property.

4. Should the City subsequently furnish water service to users of private water wells drawing water or household and/or commercial purposes, those persons owning such wells shall within 60 days connect to the public water supply. In such event, well water may continue being used for irrigation purposes, swimming pools, and other exterior purposes.

5. This application shall be accompanied by a site plan showing to scale the location.

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**APPLICANT’S SIGNATURE**

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**DATE**

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**CITY INSPECTOR**

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**DATE**

**□ CITY APPROVAL**

**□ DENIAL**

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**COMMENTS**

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**PERMIT FEE**

$100.00

**DATE ISSUED**

**ISSUED BY**

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**RECEIPT NUMBER**

1

REVISED 2017
**SEPTIC SYSTEM PERMIT APPLICATION**

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**CHECK LIST FOR SUBMITTAL REQUIREMENTS**

- **This application shall be accompanied by a site plan** showing to scale the location of all septic tanks, holding tanks or other treatment tanks, building sewers, wells, water mains, water service, streams and lakes, flood hazard areas, dosing or pumping chambers, distribution boxes, effluent systems, dual disposal systems, replacement system areas, and the location of all buildings or structures. All separating distances and dimensions shall be shown, including any distance to adjoining property. A vertical elevation reference point and a horizontal reference point shall be indicated. For other than single-family dwellings, grade slope with contours shall be shown for the grade elevation of the entire area of the soil absorption system and the area on all sides for a distance of 25 feet (7620 mm).

- **Copy of Approved DEQ permit to Construct**

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**APPLICANT**

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<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
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<tbody>
<tr>
<td>TELEPHONE #</td>
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<tr>
<td>EMAIL ADDRESS</td>
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**LOCATION OF JOB**

<table>
<thead>
<tr>
<th>HOMEOWNER</th>
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</table>

**TYPE OF SYSTEM**

<table>
<thead>
<tr>
<th>INSTALLERS STATE #</th>
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**CITY INSPECTOR**

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**COMMENTS**

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**PERMIT FEE** $25.00

**DATE ISSUED**

**ISSUED BY**

**RECEIPT NUMBER**

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REVISED 2017
Please note that confirmation that OKIE811 has been called and out to mark your site must be produced prior to the issuance of this building permit. You may submit a locate request: By phone, dial 811 or 1 (800) 522-OKIE (6543) or download the OKIE811 app from the iTunes or Google Play store.

I confirm that OKIE811 has been out to my site.

____________________________________
Signature

_______________________________
Date