



# CONTRACTOR'S LICENSE APPLICATION

Planning Office  
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Del City OK 73115

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Fax: 405-670-7368

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ STATE LICENSE NO: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**PLEASE CHECK THE LICENSE(S) BOX(ES) YOU ARE APPLYING FOR AND SUBMIT THE APPROPRIATE FEE(S):**

		<u>NEW</u>	<u>RENEWAL</u>
1.	<input type="checkbox"/> Plumbing Contractor	<input type="checkbox"/> \$200.00	<input type="checkbox"/> \$100.00
2.	<input type="checkbox"/> Electrical Contractor	<input type="checkbox"/> \$200.00	<input type="checkbox"/> \$100.00
3.	<input type="checkbox"/> Mechanical Contractor	<input type="checkbox"/> \$200.00	<input type="checkbox"/> \$100.00

1. For Renewals, the City of Del City *must have license* on file from previous year.
2. The City of Del City requires a Copy of the State License and Driver's License on file.
3. License must be renewed within the **July 1 – August 1** grace period.
4. The City of Del City requires everyone on the job site to hold a current license with the City of Del City.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>FOR STAFF USE ONLY:</b>		INFO ENTERED: _____
STATE LICENSE EXPIRATION DATE: _____		INFO VERIFIED: _____
LICENSE NO: _____	TOTAL FEE(S): _____	RECEIPT NO: _____