FENCE
PERMIT APPLICATION

PERMIT #: _____

ZONING: _____

1. **TYPE OF FENCE (*Check One*):** ☐ NEW ☐ REPLACEMENT
   MATERIAL TYPE: ☐ WOOD ☐ CHAINLINK ☐ METAL ☐ CINDERBLOCK ☐ OTHER: _____
   LOCATION: ☐ FRONT ☐ SIDE ☐ REAR ☐ INTERIOR
   ACCESSORY: ☐ WALK-IN GATE ☐ VEHICLE GATE
   FENCE LENGTH: _____
2. **STRUCTURE USE:** ☐ COMMERCIAL ☐ RESIDENTIAL ☐ CHURCH ☐ OTHER: _____

3. **SITE ADDRESS:** _____ BLDG SQ. FT.: _____
   LEGAL DESCRIPTION: ACCOUNT #: _____ LOT(S): _____ BLK(S): _____
   SUBDIVISION: _____

4. **PROPERTY OWNER:** _____ PHONE: _____
   MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
   E-MAIL ADDRESS: _____

5. **TENANT / BUSINESS NAME:** _____ PHONE: _____
   MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

6. **CONSTRUCTION ENTITY:** ☐ **PROPERTY OWNER** *(Please proceed to #7.)* ☐ **CONTRACTOR** *(Please complete section below)*
   CONTRACTOR: _____
   MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
   PHONE: _____ E-MAIL ADDRESS: _____

7. **PROJECT VALUATION:** $_____ *(Valuation is total construction cost)*

Building permit application required submittals and additional information:

1. An original signed application with both the property owner's original signature. (*Faxed, Scanned, E-mailed, or Incomplete Applications will not be accepted*).
2. Provide a copy of the project property survey showing your property lines and indicate where you will be placing your fence on the survey.
3. Provide a written scope of work for your project.
4. Every permit shall become invalid unless work authorized is commenced within 6 months after approval.
5. Inspections will be required for each of the following phases: (1) Footing, (2) Final.

FOR OFFICIAL USE ONLY

[DATE RECEIVED]

DO NOT WRITE IN THIS BOX

_____	_____	_____	_____
Property Owner / Authorized Representative	*Signature*	*Date*	*Phone*
_____	_____	_____	_____
Contractor / Authorized Representative / Title	*Signature*	*Date*	*Phone*