Residential Fence Permit Review Checklist

Applicant Name:					
Project Address:					
Project Type:					
Application					
Site Plans (cannot be drawn)					
 Legal Description (lot, block, subdivision) 					
 North arrow and scale 					
 Property lines and lot dimensions 					
 All easements 					
 Proposed structure and all existing buildings 					
 Driveways and sidewalk dimensions 					
 Existing and proposed location of utility poles, pad mounted transformers 					
Site plans showing location of fence, height and fence material					

*** REVIEWS CAN TAKE A MINIMUN OF 10 BUSINESS DAYS***



Phone: 817-489-2201

Website: www.newarktexas.com

Address: 209 Hudson St.

PO Box 156 Newark, TX 76071

Building Permit Number: _____

Fence Permit Application

A	pplicants Name:				
	ontact Number:				
	ome Owners Name (if different)				
	roject Address:				
н	eight of Fence:	_ Replacing Exis	sting Fence?	Construction Material:	:
D	etailed Description of Work:				
_					
_					
Co	ontractor Information: (If NOT home	eowner.)			
	ompany:	-	Contact Pers	on:	
	ddress:				
Pl	none Number:		Email:		
**	** Please note that you MUST be reg	istered as a con	ntractor to complete any pr	oject within the city lim	its. Contractor
R	egistration form and required support	ing information	can be found on our webs	site.	
	***A site plot plan shall be su		_		
			d void if all information is	-	_
	•		within 90 days of issuance	· · · · · ·	
Α	permit becomes null and void if wor suspended or abandoned for a per	k or construction of 180 days	on authorized is not comr at any time after work is	nenced within 180 days commenced. All permit	ts require final inspection.
dina	ereby certify that I have read and ex ances governing this type of work w nority to violate or cancel the provisi	ill be complied	with whether specified or	r not. The granting of a	permit does not presume to gi
	Signature of Applicant:				Date:
Property Owner's Signature: (If not applicant)					
***	*********	******	*****	******	*******
			Office Use Only		
	Total Fees: Payme	nt Date:	Payment Type: _	Receipt # _	By:
	Date Sent to PR:	Receive	ed from PR:	BV Project #:	

Approved By: ______ Permit Issued on: _____