

BUILDING FENCE PERMIT
CITY OF ROWLETT
P.O. BOX 99 / 3901 MAIN ST.
ROWLETT, TX. 75030-0099
972-412-6125



**FOR INSPECTIONS
CALL 972-412-6137**

PERMIT # _____

INVOICE # _____

FENCE PERMIT APPLICATION

DCAD / RCAD

Project Address: _____

Property Owner-Name & Address: _____ Phone: _____

Fence Contractor-Name & Address: _____ Phone: _____

Electrical Contractor-Name & Address: _____ Phone: _____

TORNADO DAMAGE _____

Survey attached: YES ___ NO ___

A Fence Waiver will be required to be signed and notarized by property owner or fence contractor *if* the survey indicates utility or drainage easements exist on the property. If no survey is available, the waiver will be required by default.

Type of Building: RESIDENTIAL COMMERCIAL

Please provide the following information:

- FENCE/RETAINING WALL FENCE HEIGHT (MAX 8FT): _____ SWIMMING POOL: YES ___ NO ___
- MANUAL GATE(S) MATERIAL: _____ CORNER LOT: YES ___ NO ___
- ELECTRICAL GATE(S) RETAINING WALL HEIGHT (FT): _____

Please attach a survey or aerial site map of property highlighting where the new fence will be placed with gate(s) noted.

_____ **ESTIMATED VALUE:** \$ _____

NOTICE TO APPLICANT: This permit is issued on the basis of information furnished in this application and on any submitted plans, and is subject to the provisions and requirements of the City of Rowlett Code of Ordinances and any other applicable ordinance. This permit is used only for the purpose of allowing construction of a building or structure conforming to the codes and ordinances of the City, regardless of information and/or plans submitted.

**I HEREBY ACCEPT ALL CONDITIONS HEREIN ABOVE
MENTIONED AND CERTIFY THAT ALL STATEMENTS
HEREIN RECORDED BY ME ARE TRUE**

EMAIL ADDRESS: _____

SIGNED: _____ **DATE:** _____

Agent or Applicant

DATE: _____ PERMIT FEE: _____

APPROVED: _____ OTHER: _____

Building Department

TOTAL: _____