

## Fence Permit Application

Telephone 402-296-4168  
 Fax 402-296-3600

<b>PERMIT NUMBER:</b>		<b>DATE RECEIVED</b>	
SITE ADDRESS:		PARCEL NUMBER:	
REMARKS:			
<b>APPLICANT INFORMATION</b>			
APPLICANT/BUSINESS NAME:		TELEPHONE:	
ADDRESS:		EMAIL:	
CITY, STATE, ZIP:			
<b>OWNER INFORMATION</b> LEAVE BLANK IF INFORMATION IS THE SAME			
NAME:		TELEPHONE:	
ADDRESS:		EMAIL:	
CITY, STATE, ZIP			
<b>PROJECT INFORMATION</b>			
<b>CALL 811 BEFORE YOU DIG</b>			
HEIGHT OF FENCE:		FENCE CONTRACTOR:	
TYPE OF FENCE (E.G. AC2, CEDAR, VINYL)		PROJECT CONSTRUCTION VALUE:	
FENCE LOCATION (i.e FRONT, REAR, SIDE YARD)			
<p><b>PLEASE NOTE:</b>          A <b>PLAT OF SURVEY</b> showing the <b>LOCATION OF THE FENCE</b> must accompany all fence permit applications or any alteration to existing fences. Attach fence contractor's proposal or cost sheet to permit. Any application submitted without a PLAT will be refused.</p>			
<p><b>Terms:</b> In consideration of this application and attached forms being made a part hereof, and the issuance of this permit, I/we agree to the following terms: All work performed under said permit shall be in accordance with the plans which accompany this permit application, except for such changes as may be authorized or required by the Building/Zoning Official; the proposed work is authorized by the owner of record, and that I/we have been authorized by the owner to make the application and/or schedule all necessary inspections as an agent; all work will conform to all applicable codes, laws, and ordinances of the City of Plattsmouth. I/we as owner of record or authorized agent are responsible to abide by all rules, ordinances, and any association restrictions as may apply to the proposed work associated with this permit. I/WE AGREE TO NOT OCCUPY THE BUILDING UNTIL ALL INSPECTIONS HAVE BEEN PERFORMED AND A CERTIFICATE OR OCCUPANCY HAS BEEN ISSUED. <b><u>This Permit is a public document and all information on it is subject to public review pursuant to the Nebraska Freedom of Information Act.</u></b></p>			
SIGNATURE/AUTHORIZED AGENT: _____			DATE: _____
<p><b>REVIEW CONCLUSIONS</b>          BUILDING INSPECTOR/AUTHORIZED CITY OFFICIAL          APPROVED _____ NOT APPROVED _____ DATE ISSUED: _____</p>			