



City of Lexington

BUILDING INSPECTION/CODE ENFORCEMENT

Planning ~ Zoning ~ Inspection ~ Code Compliance

919 Franklin Avenue, Lexington, MO 64067 ~ (660) 259-4633 ~ Fax (660) 259-4093

FENCING PERMIT APPLICATION

BUILDING PERMIT NO: _____ **PERMIT FEE: \$10.00**

PROJECT LOCATION AND DESCRIPTION

SITE ADDRESS: _____ **Zoning:** _____

LOCATION OF FENCE: _____

TYPE OF MATERIAL TO BE USED: _____

HEIGHT OF FENCE: Front yard: _____ Side Yard: _____ Rear yard: _____

PROPERTY LINE SETBACKS: Front: _____ Side yard: _____ Rear: _____

A SITE PLAN MUST BE INCLUDED WITH PERMIT SUBMITTAL

****THE PROPERTY OWNER IS RESPONSIBLE FOR PROPERTY LINE VERIFICATION****

PROPERTY OWNER: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

CONTRACTOR: _____

Contact Name: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

Email: _____

AGENT FOR: () Owner () Contractor

Name: _____

Address: _____

Phone: _____

Business License () Yes () No

HPC Approved () Yes () NA

PERMIT APPLICANT: I am the () Contractor () Property Owner () Agent

Value of project: \$ _____

Permit Applicant's signature: _____ Date: _____

All entries made by me on this application are true and accurate to the best of my knowledge

Permit Approved: _____ Date: _____

Building Official