

**CITY OF NORBORNE
OFFICE OF PLANNING & ZONING
109 East 2nd ST, Norborne MO 64668**

FENCING PERMIT APPLICATION

Building Permit NO: _____

Missouri One Call Systems, Inc. (1-800-344-7483) Service No. _____

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 yard: _____ Side yard: _____ Rear yard: _____

A Site Plan Must Be Included With Permit Submittal

****The Property Owner Is Responsible For Property Line Verification****

Property Owner: _____ Contractor: _____

Mailing Address: _____ Contact Name: _____

City: _____ Mailing Address: _____

State/Zip: _____ City: _____

Phone: _____ State/Zip: _____

Email: _____ Phone: _____

Email: _____

Agent Name: _____ Business License () Yes () No

Agent Address: _____ HPC Approved () Yes () No

Agent Phone: _____

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

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: _____

Planning & Zoning Administrator

SITE PLAN

Show all property lines, structures on your property and their dimensions, streets, alleys, sidewalks and proposed fencing site.