



FENCE OR ACCESSORY BUILDING PERMIT

To apply for a fence or an accessory Building permit you'll need to submit **2** sets of **either** a:

Site plan a Plot plan **OR** a Survey.

We **MUST** have **2** copies at the time of submittal

Fence instructions: On the site plan, plot plan or survey you'll mark where you'll be placing the fence around the house with a highlighter.

Accessory Building Instructions: On the site plan, Plot plan or Survey you'll need to measure the setbacks on each side of the building. (The reviewer will not review your application without these). For further details or examples please see second page.

Please submit your forms with the Single trade permit found on page 3.

Time frame: 7-10 days (sometimes sooner)

Pricing:

Fence: \$35.00

Accessory Building: \$50.00



CITY OF DESOTO

211 E. Pleasant Run Rd. DeSoto, Texas 75115

SINGLE TRADE-BUILDING PERMIT

<input type="checkbox"/> ELECTRICAL		<input type="checkbox"/> MECHANICAL/HVAC		<input type="checkbox"/> PLUMBING		<input type="checkbox"/> ACCESSORY BLDG/STORAGE		<input type="checkbox"/> CARPORT/PATIO-COVER	
<input type="checkbox"/> FENCE/RETAINING WALL		<input type="checkbox"/> DEMO		<input type="checkbox"/> SWIMMING POOL		<input type="checkbox"/> FOUNDATION REPAIR		<input type="checkbox"/> OTHER- _____	

ADDRESS: _____ DeSoto, TX 75115
Project address

DESCRIPTION OF WORK: _____

TYPE OF MATERIALS: _____ **SIZE OF STRUCTURE:** _____

VALUE OF WORK: \$ _____

PROPERTY OWNERS PRINTED NAME: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: (____) _____

CONTRACTORS:	ADDRESS: <small>physical/mailling include city,state & zip</small>	PHONE #
GENERAL _____ /	_____ /	_____ /
ELECTRICAL: _____ /	_____ /	_____ /
PLUMBING: _____ /	_____ /	_____ /
MECHANICAL: _____ /	_____ /	_____ /

I have hereby read and completed this application and know the same is true and correct and hereby agree to comply with all City, State, and Federal laws applicable to my property and project whether herein stated or not. I am the owner or the duly authorized agent of the above described property. Permission is hereby granted to enter this premise and make all investigations and inspections as required.

APPLICANT'S PRINTED NAME: _____
Company name/individual completing form.

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: () _____ CELL: () _____

E-MAIL ADDRESS: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY/ PLAN REVIEW			
BLDG. INSP. _____	DATE: _____	APPROVED: <input type="radio"/> DENIED: <input type="radio"/>	PERMIT FEE: \$ _____