



FENCE PERMIT CHECKLIST

To submit we will need:

- **2** copies of either a:
Site plan
Plot plan
Survey

On the drawings please mark with a **highlighter** or **bold marker** where the fence will be placed. This needs to be done for new or replacement fences.

See attachment for more details and examples

Time Frame: 7–10 business days

Pricing: \$35.00



CITY OF DESOTO

SINGLE TRADE-BUILDING PERMIT

___ RESIDENTIAL ___ COMMERCIAL

<input type="checkbox"/> FENCE	<input type="checkbox"/> ACCESSORY BLDG	<input type="checkbox"/> CARPORT	<input type="checkbox"/> SINGLE TRADE	<input type="checkbox"/> PATIO-COVER
<input type="checkbox"/> RETAINING WALL	<input type="checkbox"/> DEMO	<input type="checkbox"/> SWIMMING POOL	<input type="checkbox"/> FOUNDATION REPAIR	<input type="checkbox"/> OTHER-_____

PERMIT ADDRESS: _____ DeSoto, TX 75115

DESCRIPTION OF WORK: _____

TYPE OF MATERIALS: _____ SIZE OF STRUCTURE OR HEIGHT OF FENCE: _____

VALUE OF WORK: _____

PROPERTY OWNERS PRINTED NAME: _____

ADDRESS: _____ PHONE NUMBER: _____

CONTRACTORS:

ADDRESS: physical/mailling
Include city, state & zip

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 or 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: DENIED: PERMIT FEE: \$ _____