



CITY OF LONE OAK
115 TOWN SQUARE/P.O. BOX 127
LONE OAK, TEXAS 75453 (903) 662-5116

FENCE PERMIT APPLICATION

Permit good for 180 days

PERMIT FEE: \$25.00

INSPECTIONS CAN BE SCHEDULED BY CALLING 903-662-5116

Work to be Performed: <input type="checkbox"/> New Fence <input type="checkbox"/> Replacement	Fence Material: <input type="checkbox"/> Wood <input type="checkbox"/> Chain Link <input type="checkbox"/> Pipe and Cable <input type="checkbox"/> Commercial or Livestock Grade Vinyl <input type="checkbox"/> Masonry _____ <input type="checkbox"/> Wrought iron/tubular steel <input type="checkbox"/> Other	Fence Dimensions Height _____ Linear Feet _____
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PROPERTY INFORMATION	ADDRESS		SUBDIVISION	
	BLOCK:	LOT:	ZONING (Residential or Commercial):	
PROPERTY OWNER	PROPERTY OWNER NAME:		PROPERTY OWNER PHONE #:	
GENERAL CONTRACTOR	GENERAL CONTRACTOR COMPANY NAME & CONTACT INFO:		GENERAL PHONE #:	
	GENERAL CONTRACTOR ADDRESS		REGISTERED WITH CITY?	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	

NOTE: This application shall be accompanied by a diagram showing the proposed location of the fence, property lines, building lines, and easements. In some cases, construction documents or other information may be required.

I certify under penalty of perjury that the above information furnished by me is true and correct to the best of my knowledge. I understand the ordinances governing the activity described in this application and agree to comply with all provisions contained within the City of Lone Oak code of ordinances, Texas state law and all property restrictions. I understand that it is my responsibility to correctly represent my property boundary, easements, rights-of-way, and utilities and to ensure that my fence is accurately installed. I understand that it is my responsibility to research and comply with all private deed restrictions or private subdivision requirements. As the owner of the above property, I hereby grant permission to enter the premises and make all necessary inspections.

Signature _____ **Date** _____

Comments:

For office use only:

Date Plans Received: _____ **by** _____ **Date Approved:** _____ **Date Issued:** _____ **Paid:** _____