



## FENCE/WALL CONSTRUCTION APPLICATION PERMIT

101 N. 4<sup>th</sup> Street / P. O. Box 1030  
Douglas, Wyoming 82633  
307-358-2132, Fax: 307-358-2133

**Property Owner:**

**Contractor / Self**

**Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Contractor License Number:** \_\_\_\_\_

**Address of Fence/Wall Construction:** \_\_\_\_\_

**Fence/Wall Material/Type:** \_\_\_\_\_

**Fence/Wall Height:** Front: \_\_\_\_\_ Side: \_\_\_\_\_ Back: \_\_\_\_\_

**Corner Lot:** Yes  No

Applicant must provide:

- Verification of physical location of property pins.
- Survey and setting of property corners by a licensed land surveyor.
- Convenience fence agreement with adjoining property owner(s).
- Stamped engineered drawings for walls over four (4) feet in height.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Community Development Department Use Only*

**When property validated, this application shall serve as the Fence/Wall Construction Permit.**

**Approved by:** \_\_\_\_\_ **Date Issued:** \_\_\_\_\_

**Final Inspection Date:** \_\_\_\_\_ **Inspector:** \_\_\_\_\_