



CITY OF BELTON
CITY HALL ANNEX
 520 Main Street
 Belton, MO 64012
 (816) 331-4331
 FAX (816) 331-6973

PERMIT # _____
DATE _____
PERMIT FEE <u> \$10.00 </u>

FENCE PERMIT APPLICATION

JOB LOCATION _____

OWNER _____ PH. NO. _____

EMAIL _____

CONTRACTOR'S NAME _____ CONTACT _____

CONTRACTOR'S ADDRESS _____

EMAIL _____ PH. NO. _____

Payment Method: Cash or Check
 Online Credit Card Payment - MasterCard, Visa or Discover (Fees apply)

PLEASE PROVIDE A PLOT PLAN SHOWING FENCE DETAILS & LOCATION OF FENCE ON PROPERTY

****TYPE OF FENCE****
 (Circle Type & Indicate Height)

PRIVACY: Wood / Vinyl	Height:
CHAIN-LINK:	Height:
SPLIT-RAIL:	Height:
PICKET:	Height:

APPLICANT'S SIGNATURE _____ DATE: _____

****STAFF COMMENTS****

(**CONSTRUCTION MUST BE COMPLETED WITHIN 180-DAYS**)

APPROVE / DENY STAFF SIGNATURE _____ DATE: _____