



FENCE PERMIT APPLICATION

City of Duquesne

1501 S. Duquesne Rd, Joplin, MO 64801 (417) 781-5085

Property Address: _____

Subdivision: _____ Lot #: _____ Zoning: _____

If property is not located in a subdivision, the legal description must be attached

Property Owner: _____ Phone: _____

Address (City, State, Zip): _____

Contractor: _____ Phone: _____

Address (City, State, Zip): _____ Lic #: _____

Fence Location (NOTE: A corner lot has two "front" yards, one for each street.)

☐ Front yard

☐ Side Yard

☐ Rear Yard

Total Construction Cost

Type of Improvement

☐ Chain Link

☐ Wood

☐ Woven Wire

☐ Wrought Iron

☐ Concrete

☐ Plastic Resin

☐ Repair / Replacement

☐ Other: _____

Height: _____

Required Documentation

☐ Lot Sketch, to-scale, showing the following: all easements, property lines, existing buildings and fences, and location of proposed fence or wall with dimensions.

TOTAL COST OF PERMIT

\$25.00

STATEMENT: I UNDERSTAND THAT MY FENCE HEIGHT IS NOT TO EXCEED 6' ON ANY SIDE. _____

CERTIFICATION

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT; THAT I HAVE READ AND UNDERSTAND THE PROCEDURES, ORDINANCES, AND REQUIREMENTS ASSOCIATED WITH THE APPLICATION AND REVIEW PROCESS. I ALSO UNDERSTAND THAT THIS APPLICATION WILL EXPIRE WITHIN 90 DAYS OF THE DATE OF MY SIGNING, UNLESS EXTENDED BY THE CITY CLERK PURSUANT TO A WRITTEN REQUEST FOR EXTENSION RECEIVED PRIOR TO THE EXPIRATION DATE. FURTHERMORE, I ACKNOWLEDGE THAT I WILL BE RESPONSIBLE FOR ANY AND ALL COSTS INCURRED BY PLAN REVIEWS PERFORMED BY CONSULTANTS OF THE CITY. THESE COSTS MAY BE PAID BY THE CITY AND REIMBURSED BY THE APPLICANT UPON INVOICING.

Owner/Agent Signature

Date

Owner/Agent Printed Name

OFFICE USE ONLY

PERMIT #

Date Received

Lot Sketch Review