



RESIDENTIAL FENCE PACKET

Town of Fairview

372 Town Place

Fairview Texas 75069

Phone: 972.886.4209

Fax: 972.548.0268

Inspection Line: 972.886.4250

inspections@fairviewtexas.org

permits@fairviewtexas.org



TOWN OF FAIRVIEW
APPLICATION FOR FENCE PERMIT
PERMIT # _____

ADDRESS _____

SUBDIVISION _____ **LOT/BLOCK** _____

OWNER (NAME & ADDRESS) _____

CONTRACTOR (NAME & ADDRESS) _____

PHONE NUMBER _____ **EMAIL** _____

PROPOSED USE: ☐ **RESIDENTIAL** ☐ **COMMERCIAL**

<p>CONSTRUCTION INFORMATION:</p> <p>ESTIMATED COST _____</p> <p>CONSTRUCTION TYPE:</p> <p style="margin-left: 40px;"><input type="checkbox"/> WROUGHT IRON</p> <p style="margin-left: 40px;"><input type="checkbox"/> WOODEN</p> <p style="margin-left: 40px;"><input type="checkbox"/> CHAIN LINK</p> <p style="margin-left: 40px;"><input type="checkbox"/> OTHER _____</p> <p>HEIGHT _____</p> <p><input type="checkbox"/> SWIMMING POOL</p> <p>GATE ENTRANCE <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>ELECTRICAL <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>ELECTRIC CO _____</p>	<p>FEES:</p> <p>PLAN REVIEW FEE: \$25.00</p> <p>PERMIT FEE: \$25.00</p> <p><input type="checkbox"/> PLAT-REQUIRED FOR SUBMITTAL</p> <p><input type="checkbox"/> EASEMENT WAIVER</p> <p><input type="checkbox"/> OTHER _____</p> <p><input type="checkbox"/> KNOX BOX REQUIRED</p> <p style="text-align: center;">OTHER INFORMATION</p> <p>_____</p> <p>_____</p> <p>_____</p>
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****The undersigned applicant hereby declares that the above facts are true and correct and that the construction proposed herein will be performed in conformity with existing regulations as pertain to building and zoning as passed by the Town Council of the Town of Fairview, Texas. MUST MEET CODES. SUBJECT TO FIELD INSPECTIONS. ****

APPLICANT SIGNATURE _____ **DATE** _____

APPROVED _____ **PLAN REVIEW DATE** _____

PICKUP SIGNATURE _____ **DATE** _____

TOWN OF FAIRVIEW, 372 TOWN PLACE, FAIRVIEW, TEXAS 75069
INSPECTION LINE: 972-886-4250
EMAIL: PERMITS@FAIRVIEWTEXAS.ORG
PERMIT DEPT #: 972-886-4209



Contractor Registration Application
(Select Only One Type Per Application)

Contractor Type:

☐ General Contractor

If renewal check here: ☐

☐ Swimming Pool

Cost for these contractors:

☐ Fence

\$50.00 New

☐ Irrigation

\$25.00 Renewal

☐ Sign

Contractor Type:

☐ Plumbing

☐ Fire Alarm

There is no charge for these contractor types

☐ Fire Sprinkler (Suppression)

Expiration based on License/Certificate expiration date

☐ Mechanical

If renewal check here: ☐

☐ Backflow/Septic

☐ Electrical

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ **Email:** _____ **@** _____

Master/CEO Responsible for Supervision: _____

License/Certificate # _____ **Expiration Date:** _____

Driver's License # _____ **Expiration Date:** _____

I understand and agree that the above named shall be responsible for continuous supervision of all installation of all installations and repairs performed in the Town of Fairview under the above-named contractor and should such Master Licensee no longer be employed, no further work shall be performed until registration has been provided to the Building Inspections Department naming a new Master License holder. I will request all necessary inspections by the Town of Fairview to ensure compliance with all city regulations applicable for the proposed work.

Contractor's Signature: _____ **Date:** _____

*******Include a copy of your driver's license, master's license and/or certificate AND liability COI with the Town of Fairview identified as the Insured for processing**

******* Email information to: permits@fairviewtexas.org**

Information not received thru permits@fairviewtexas.org will not be processed.



WAIVER TO CONSTRUCT IN MUNICIPAL EASEMENT

DATE: _____

ADDRESS: _____

OWNER: _____

DESCRIPTION/TYPE OF EXISTING EASEMENT: _____

DESCRIPTION OF ITEM/S TO BE CONSTRUCTED IN EASEMENT:

THE OWNER UNDERSTANDS THAT THE TOWN MAY EXERCISE ITS RIGHT TO PERFORM MAINTENANCE IN ABOVE SAID EASEMENT AND REMOVE ANY PART OF OR ALL OF THE ABOVE DESCRIBED ITEM/S IN THE ABOVE DESCRIBED EASEMENT. THE OWNER FURTHER AGREES BY HIS/HER SIGNATURE BELOW THAT THEY WILL BE SOLEY RESPONSIBLE FOR THE REPLACEMENT OF ANY OR ALL OF THE ITEMS REMOVED BY THE TOWN. THE OWNER ALSO UNDERSTANDS THAT ONLY THE ITEMS LISTED HERE ARE APPROVED AND ANY ADDITIONAL ITEMS IN THE FUTURE MUST BE PERMITTED SEPERATELY.

FOR SURFACE DRAINAGE EASEMENTS, OWNER AGREES BY SIGNING THIS WAIVER TO REMOVE OR MODIFY CONSTRUCTION IN EASEMENT IF FUTURE DRAINAGE ISSUES SUCH AS EROSION OR FLOOD DAMAGE ARISE ON ADJACENT PROPERTIES.

OWNER

TOWN OFFICIAL

DATE

DATE



Photo/Video Inspection Certification

I hereby swear and affirm that the photos and/or videos which I have submitted for review in conjunction with the Permit listed below is a true and accurate documentation of the work performed.

I acknowledge that by submitting inaccurate or incorrect information, photos or videos, I am falsifying official government documents of the Town of Fairview and may be prosecuted to the fullest extent of the law, which may include fines and citations from the Town of Fairview and further action from the State of Texas. I also understand that the Town of Fairview may not accept these photos and/or videos as sufficient and may require an onsite visit or more photo/video documentation.

*This must be signed and on file prior to scheduling this inspection.

PERMIT NUMBER: _____ DATE: __ __ __ __

ADDRESS OF WORK PREFORMED: _____

TYPE OF WORK: _____

NAME OF COMPANY: _____

PRINT NAME OF (CONTRACTOR/RMP): _____

LICENSE NUMBER OF (CONTRACTOR/ RMP): _____

SIGNATURE OF (CONTRACTOR/ RMP): _____