

FENCE PERMIT APPLICATION

For Office Use Only:

Case No.: _____

Filing Fee: _____

Date Permit Issued: _____

Please complete the form and return to:

Building/Planning & Zoning Department
City of El Dorado
220 E. 1st Street
El Dorado, Kansas 67042

APPLICANT: _____ PHONE: _____

ADDRESS: _____ ZIP: _____

OWNER: _____ PHONE: _____

ADDRESS: _____ ZIP: _____

LOCATION OF PROPOSED FENCE: _____

SITE SKETCH ATTACHED: _____ yes _____ no

ADJACENT LAND USE:

North _____
South _____
East _____
West _____

Present Use of Property: _____

SIGNATURE: _____ DATE: _____

BY: _____

TITLE: _____