

**FENCE/WALL PERMIT APPLICATION**

**City of Smiths Station  
P. O. Box 250, 2336 Lee Road 430  
Smiths Station, AL 36877**

**(334) 297-8771 Office Website [www.smithsstation.us](http://www.smithsstation.us) (334) 448-8422 FAX**

Date of Application: \_\_\_\_\_ Zoning: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Fence/Wall Construction:**

Type		Materials	
	Privacy		Chain Link
	Security		Wood
	Retaining		Brick/ Concrete Block

**Other** (specify Type/Materials) \_\_\_\_\_

**Dimensions:** Height: \_\_\_\_\_ Length: \_\_\_\_\_

Contractor: \_\_\_\_\_ City Business License No: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

**NOTE: Please provide a sketch on rear of application or attach site plan denoting specific location on property.**

**CERTIFICATION OF OWNER**

This permit becomes null and void if authorized work or construction has not begun with six (6) months of issuance of permit, or if work is suspended or abandoned for a period of one (1) year at any time after work has commenced.

I, hereby, certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this work shall be complied with whether specified here or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name

OFFICIAL USE ONLY	
<b>Date Received:</b>	<b>Case No:</b>
<b>Permit Fee:</b>	<b>Receipt No:</b>
<b>Planning Dept. Approved / Denied</b>	<b>Date Reviewed:</b>
<b>Print Name of Reviewer:</b>	<b>Signature of Reviewer:</b>

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In the space below, please provide a sketch of the fence relative to the property. Please include existing structures, roads, and property lines. If an official survey of the property is provided, disregard this step.

