Clark County Building Department 4701 West Russell Road, Las Vegas, NV 89118 ~ (702) 455-3000 Fence Permit Application Residential Commercial James Gerren, P.E., Director Werner Hellmer, P.E., Deputy Director * Scott Telford, P.E., Deputy Director APPLICATION NO.:					
Project Name:					
Subdivision Name:					
Project Address: Lot/Blk#:					
Property Owner Name: Property Owner Email: CITIZEN ACCESS CONTACT INFORMATION					
Name:	Company Name:				
Mailing Address:					
City:					
Email: Contact ID: Applicant Signature:					
The wall/fence is totally within the bounda					
The wall/fence is located on the property line.			<u>VEHICULAR ACCESS GATES</u> Electrical meter permit number		
See the attached notarized letter from the adjacent property owner.			Does access gate cross fire lane? YES NO		
		TION OF WORK			
CONTRACTOR'S DECLARATION I hereby certify that I am licensed under the provisions of N.R.S.624. ST. LIC. #.: CLASS: MULTI-JURISD. BUSINESS LIC. # BUSINESS LIC. # CONTRACTOR NAME:			PERMIT FEES IMPORTANT — PLEASE READ BEFORE SIGNING! WALL AND FENCE ACKNOWLEDGEMENT I have indicated all natural and man-made water courses which may have an impact on or be impacted by the proposed retaining wall, block wall or fence. I understand and agree that should the County determine that this retaining wall, block wall or fence be detrimental to the safe flow of any water course, this permit will be rendered invalid immediately. I further agree that if I fail to adhere to the above requirements, the retaining wall, block wall		
CONTRACTOR SIGNATURE DATE OWNER/BUILDER DECLARATION or fence may be abated, removed or altered at my expense. I certify that I have read this Application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above mentioned property for inspection purposes. or fence may be abated, removed or altered at my expense. I certify that I have read this Application and state that the above information is correct. I agree to comply with all city/county ordinances and state laws relating to building construction, and hereby authorize representatives of this County to enter upon the above mentioned property for inspection or fence may be abated, removed or altered at my expense. I certify that I have read this Application and state that the above information is correct. I agree to comply with all city/county ordinances and state laws relating to building construction.					
				PERMIT FEES	
PROPERTY OWNER SIGNATURE	DATE		Valuation:	\$	
Civil Engineering Review By: Date:			Permit Fee:	\$	
Zoning Review By: Date:		Bldg Plan Review Fe	e: \$		
Bldg Plan Review By: Date:			Zoning Plan Review	Fee: \$	
Block Lin. Ft. @ 4' :	=	Sq. Ft.	NOV Fee:	\$	
Block Lin. Ft. @ 6' =	=	Sq. Ft.			
	=				
	=	Sq. Ft.	TOTAL FEE:	\$	
			Issued By:	Date:	

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