



13000 William Dodson Pkwy  
Farmers Branch, TX 75234  
972-919-2549  
fbinspections@farmersbranchtx.gov

# Fence Permit Application

Date: \_\_\_\_\_

Address of Project: \_\_\_\_\_ Suite \_\_\_\_\_, Farmers Branch

Zone: ☐ Residential ☐ Commercial ☐ Multi-Family (Apts)  
Residential Type: ☐ Corner Lot ☐ Interior Lot ☐ Creek Lot (or other water) ☐ Flood Plain Lot  
☐ Mercer Crossing Lot ☐ Branch Crossing Lot

Property Owner _____		Phone # _____
Address (if different from project address) _____		
Property Owner E-Mail _____		
Applicant Name _____		Phone # _____
Applicant E-Mail _____		
Applicant Relationship to Project: <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Contractor <input type="checkbox"/> Other: _____		
Contractor Business Name (if applicable) _____		
Address _____		
Electrician (if motorized gate) _____		
State Lic # _____	Expiration Date _____	Value/Cost \$ _____

1. Description of Fence/Wall \_\_\_\_\_

2. Value (Cost) \$ \_\_\_\_\_ 3. Length: \_\_\_\_\_ 4. Height: \_\_\_\_\_

5. Main Permit # (for General Contractor), if applicable: \_\_\_\_\_

6. Proposed Location ☐ Replace in Existing ☐ Install at New ☐ Both/Combo

7. Material Type:

☐ Chain Link ☐ Wood ☐ Ornamental/Wrought Iron  
☐ Masonry Wall (footing design required) ☐ Retaining Wall (detail/design required)  
☐ Other \_\_\_\_\_

8. The property survey map is attached (REQUIRED) Yes ☐ No ☐

9. The proposed fence location is marked upon attached property survey map Yes ☐ No ☐

10. The property is part of an active HOA (Home Owner Association) Yes ☐ No ☐

11. Fence/Wall will encroach another property, easement, or ROW Yes ☐ No ☐

12. Material Pattern, Height, & Construction method matches between corner posts Yes ☐ No ☐

13. An access gate is provided for maintenance of alley/easement or ROW Yes ☐ No ☐

14. A vehicle access gate will be installed across a driveway Yes ☐ No ☐

15. A swimming pool/spa is located on this property Yes ☐ No ☐

16. An existing fence shall remain alongside the proposed fence Yes ☐ No ☐

Permits for flatwork/paving shall expire in **180 days**. I hereby certify that I have read and examined this application and know the same to be true and correct. I acknowledge and comprehend the requirements. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a 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. I am the owner of the above-described property or am his/her representative. Permission is hereby granted to enter the premises and make all inspections.

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Printed Name

Approved By \_\_\_\_\_ Fee: \$ \_\_\_\_\_ Office Use Only Permit #: \_\_\_\_\_

Date: \_\_\_\_\_ Invoice #: \_\_\_\_\_