



WALL FENCE PERMIT APPLICATION

Street Address of Job Site _____ APN# _____

Owner _____ Phone Number () _____

Owner's Address _____

Subdivision/Project _____ Lot # _____

PLANS Attached to Permit Plans on File City Standards (non-retaining)

- 1. Lineal Feet _____ Height _____ Sq. Feet _____
2. Lineal Feet _____ Height _____ Sq. Feet _____
3. Lineal Feet _____ Height _____ Sq. Feet _____

Permit Covers CMU Wall Concrete Wall CMU Retaining Wall Concrete Retaining Wall
 Rockery Wall Trash Enclosure (City Standards)

Description of Work _____

Permittee must build according to above description and to the approved plans and specifications of the Building Code and to call the Building Department for any changes and inspections at each building phase.

This permit is being issued subject to the following _____

IMPORTANT-PLEASE READ BEFORE SIGNING

Wall and Fence Acknowledgment

I have indicated all natural and man-made water courses which may have an impacted by the proposed retaining wall, block wall or fence. I understand and agree that should the City of Mesquite 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 I fail to adhere to the above requirements, the retaining wall, block wall 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 and county ordinances / codes and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

GENERAL CONTRACTOR/OWNER _____ Phone Number _____

Q.P. License Holder _____ Q.P. License Holder _____ Date _____
(Print Full Name) (Signature)

I hereby certify that the information provided on this application form, and any plans submitted, are complete and correct and request the issuance of a permit with the City of Mesquite. I also certify that all Subcontractors working on this permit are licensed within the City of Mesquite and the State of Nevada.

Internal Use Area
Bin No. _____ Permit No. _____ Date Received _____ Submittal Amount _____ Check No. _____

BUILDING DEPARTMENT
10 E. Mesquite Blvd., Mesquite, NV 89027
702-346-2835, FAX 702-346-5382, www.mesquitenv.gov