



City of Odessa

COMMUNITY PLANNING & DEVELOPMENT

Planning ~ Zoning ~ Inspection ~ Code Compliance

125 S 2nd Street, Odessa, MO 64076 – (816) 230-5577 – Fax (816) 633-4985

FENCING PERMIT APPLICATION

BUILDING PERMIT NO. _____ **PERMIT FEE:** _____

PROJECT LOCATION AND DESCRIPTION

SITE ADDRESS _____ **ZONING:** _____

LOT: _____ **BLOCK:** _____ **SUBDIVISION:** _____

LOCATION OF FENCE: _____ **Material:** _____

Height of fence ~ Front Yard: _____ **Side Yard:** _____ **Back:** _____

****A SITE PLAN MUST BE INCLUDED WITH PERMIT SUBMITTAL****

PROPERTY OWNER: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

CONTRACTOR: _____

Contact Name: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

Fax: _____

AGENT FOR: () Owner () Contractor

Name: _____

Address: _____

Phone: _____

Craftsman License No: _____

Business License No: _____

PERMIT APPLICANT: I am the () Contractor () Property Owner () Agent

Value of project: \$ _____

Permit Applicant's signature: _____ Date: _____

All entries made by me on this application are true and accurate to the best of my knowledge

Permit Approved: _____ Date: _____

Building Official