



Fence Permit Application

509-659-1930 City Hall 509-659-0253 Fax or email: Julie.Flyckt@ritzville-wa.us

Date _____

Permit No. _____

Job Address			
Legal Description	Lot No,	Blk	Tract
Owners Name	Mailing Address		Phone ()
Contractor	Mailing Address		Phone ()
Architect or Designer	Mailing Address		Phone ()
Engineer	Mailing Address		Phone ()
Lender	Mailing Address		Phone ()
Use			
Class of work	New <input type="checkbox"/>	Addition <input type="checkbox"/>	Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Remove <input type="checkbox"/>
Describe Work:			
<p>NOTICE: Separate permits are required for Electrical, Plumbing, Heating, Ventilating or Air Conditioning</p> <p>This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is 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 type pf 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.</p>			
Signature of Contractor or Authorized agent		Date:	Building Insp:
Signature of Owner (If owner Built)		Date:	Clerk
When properly validated in this spot this is your permit.			