

**CITY OF CHADRON
FENCE/WALL PERMIT APPLICATION**

1. Applicant's Name _____ Date _____
2. Applicant's Address _____ Phone _____
3. Address where fence is to be installed _____
4. Legal description of lot _____

5. Type of fence _____
6. Zoning of property _____
7. Attached:
Site Plan (on back)
8. I have read the City's Fence/Wall/Hedge Regulations of the City of Chadron and will install the fence identified in this application, in accordance with these regulations. Construction will commence within six (6) months and will be completed within twelve (12) months from date of permit issuance.

Applicant's Signature _____

Date _____

Please prepare your site plan on the back of this sheet)

PLEASE DRAW YOUR SITE PLAN IN THIS SPACE

Street Address _____