



# CITY OF HEATH

200 Laurence Dr, Heath TX 75032

Phone 972-961-4883

## FENCE/GATE/RETAINING WALL SCREENING WALL/SUBDIVISION ENTRY WAY PERMIT PERMIT # \_\_\_\_\_

Project Address \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Owner \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Owner  
Address \_\_\_\_\_

Contractor \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

Project Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

### **SUB CONTRACTORS**

Electrical Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Concrete Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Foundation Engineer \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

### **FENCE TYPE:**

Pool Barrier \_\_\_\_\_ Perimeter Fence \_\_\_\_\_ Gate \_\_\_\_\_ Other (explain) \_\_\_\_\_

Subdivision Entry Way (engineered plans must be submitted with permit) \_\_\_\_\_

Retaining wall 2' or taller (engineered plans must be submitted with permit) \_\_\_\_\_ All Retaining Walls must be designed for a safety factor of 1.5 against lateral sliding and overturning.

HEIGHT OF FENCE \_\_\_\_\_ MATERIAL(S) TO BE USED \_\_\_\_\_

DESCRIPTION OF WORK \_\_\_\_\_

\_\_\_\_ City Sewer \_\_\_\_\_ Private Septic (Aerobic or Conventional. Locate septic system tanks, leach fields, lateral lines and aerobic spray heads on site plan with any easements or flood plains.

**I am the owner, the contractor or the duly authorized agent of the above property. I agree to comply with all codes and Ordinances of The City of Heath. This permit is issued on the basis of information furnished in this application and on any submitted plans or documents, and is subject to the provisions and requirements of the 2021 International Residential Code and The City of Heath Code of Ordinances. If any information is found to be untrue or incomplete this permit may be revoked and all construction stopped until a new permit has been approved and issued. Permission is hereby granted to enter the premises to make inspections. I hereby accept all conditions herein and certify that all statements herein recorded by me are true.**

APPROVED: \_\_\_\_\_  
Building Dept \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_  
Contractor or Agent

Print Name \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_