PINAL COUNTY
WIDE OPEN OPPORTUNITY

PINAL COUNTY COMMUNITY DEVELOPMENT
BUILDING SAFETY DIVISION
85 N FLORENCE STREET 1ST FLOOR / P.O. BOX 2973 FLORENCE AZ 85132
OFFICE: 520-509-3555 FAX: 520-866-6530

Building Permit #

WALL/FENCE PERMIT APPLICATION

TYPE OF WALL/FENCE: *SUBDIVISION _____RESIDENTIAL _____COMMERCIAL _____RETAINING _____**

PARCEL _____

SECTION _____ **TOWNSHIP** _____ **RANGE** _____

SUBDIVISION/PARK _____ **LOT#** _____

STREET ADDRESS: _____ **CITY/STATE/ZIP** _____

PROPERTY OWNER(S) _____ **ADDRESS**_____

CITY/STATE/ZIP_____**PHONE**_____

CONTRACTOR_____ **ADDRESS** _____

CITY/STATE/ZIP _____ **LICENSE/CLASS** _____

HEIGHT OF FENCE/WALL IN FRONT YARD _____ **VARIANCE: YES NO N/A**

HEIGHT OF FENCE/WALL IN REAR & SIDE YARD _____ **VARIANCE: YES NO N/A**

LINEAL FOOTAGE_____ ***(Only required for Subdivision Walls/Fences)***

HEIGHT _____ **X LENGTH** _____ **= TOTAL** _____ ****(Only required for Retaining Walls)***

DISTRICT OFFICE WHERE TO PICK UP PERMIT: FLORENCE

CONTACT PERSON (WHO DO WE CONTACT WHEN PERMIT IS READY FOR PICKUP AND/OR QUESTIONS?):

NAME _____ PHONE _____

EMAIL _____

I UNDERSTAND THAT APPROVAL OF THIS APPLICATION DOES NOT GUARANTEE APPROVAL OF THE ACTUAL CONSTRUCTION. I HEREBY CERTIFY THAT THE INFORMATION ON THIS APPLICATION AND ALL RELATED SUBMITTALS ARE TRUE AND CORRECT.

_____ _____ _____
PRINT NAME PLEASE SIGNATURE OF OWNER/ AGENT DATE

FOR OFFICE USE ONLY

ADDRESS YES NO **FLOODZONE** _____ **PLAN CHECK FEE** _____

AREA N S E W **NON-CONF** _____ **PERMIT FEE** _____

ZONING _____ **PT/PE** _____/_____

CCO _____ **ECD:** _____

UPDATED: AUG 2023