Zoning Classification	Value \$	P	ERMIT NU	MBER	(*)	
		FEE \$25.00	CASH	CHECK#	CC	
,	APPLICATION	ON FOR A FENCE	PERMIT			
	ECTIONS: Fill in the following equired information is furnished		ly and complete	ely as possible. <u>This</u>	application is	
Property Owner	Contrac	Contractor				
Address		Address	Address			
City, State, Zip	Phone 1	Phone Number				
Phone Number	Cell Ph	Cell Phone				
	on of the Property					
Address of Fence Site		Size &	Kind			
Replacement or New Fenc	e:					
Approximately when will	the construction: Start	F	inish			
	rovements be assessed?					
Passamendations needed	dent at (308) 754-4483 regardi	(Matt Helz	er's signature)			
alteration or change in plan constitute sufficient ground The signature also indica at any time until complet		the Zoning Administrator hit. <u>This permit is valid is</u> Zoning Administrator	subsequent to the for one (1) year to inspect the s	e issuance of the Perr r from approval dat site in which this pe	nit, shall <u>te.</u> rmit is grante	
Signature of Applicant			D	Pate		
N Drawing:		y .				
w			E			
	9		ş			
For Office Use Only:	S			Date		
Permit is Approved Reasons for Denial:	Denied	Zoning Administ	rator	Dato		
Coasons for Denial.	G1	David Toutes Administra	vator			
e.	704 6	. Paul Zoning Administ th St, St. Paul, NE 68873	3			
	Phone 308-754-4483	3, E-mail: mhelzer@city	ofstpaulne.org	5		