



## FENCE PERMIT APPLICATION

Town of Seven Devils  
157 Seven Devils Rd.  
Seven Devils, NC 28604  
(828) 963-5343/ (828) 963-7418 (f)

DATE: \_\_\_\_\_

OWNER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

**\*Please provide plot plan showing location of fence and lot boundaries and distances from fence to property lines. Corners must be clearly marked in the field.\***

MATERIAL FENCE IS TO BE CONSTRUCTED WITH: \_\_\_\_\_

**\*The undersigned agrees to conform to the requirements of Town of Seven Devils Ordinances.**

\_\_\_\_\_  
APPLICANT: OWNER  
CONTRACTOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SEVEN DEVILS ZONING ADMINISTRATOR

\_\_\_\_\_  
DATE