

This application is not a permit until fees are received and drawings/plans (if applicable) are approved. Any work prior to permit issuance is prohibited. Permits are non-transferable and Fees are Non-Refundable! All permit applications are to be completed and submitted through the BS&A Online Permitting Portal:
<https://bsaonline.com/?uid=2757>

PROJECT ADDRESS: _____ **Unit/Suite/Apt#:** _____ **Parcel:** _____

Residential **Commercial**

Select One:

- A. **Fence**
- B. **Decorative Wall**
- C. **Retaining Wall**
- D. **Other** _____

Project Description / Full Scope:
(Required):

ESTIMATED VALUE (Required):
(Total Value of Job)

\$ _____

Information

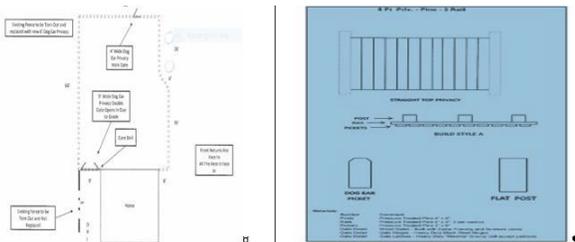
Typically, all fence, decorative walls and/or retaining wall permits require a 5-business plan review! (See [Plan Review Process](#))

Fence and Decorative Walls Submittal:

Application with site plan showing:

- 1) street
- 2) orientation of house or structure
- 3) fence/wall location, height, and material

(see sample below)

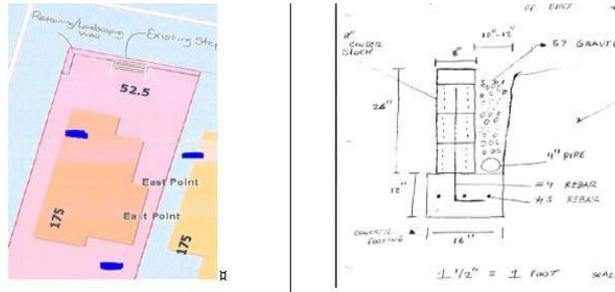


Retaining Walls Submittal:

Application with site plan showing:

- 1) street
- 2) orientation of house or structure
- 3) retaining wall location, height, and wall material
- 3) if retaining wall is over 4 ft, drawings must have Engineer stamp of approval
- 4) be advised that depending on the scope of work, a Land Disturbance Permit (LDP) may be required
- 5) commercial retaining wall submittals must have official survey and drawings must be stamped by a design professional

(see sample below)



What's Next:

1. [Setup Online Account](#)
2. [Submit application and drawings via BS&A Portal.](#)



3. After payment of invoice, plan review will start ([See Plan Review Process.](#))

APPLICATION INFORMATION

Who is the PERMIT HOLDER – the person responsible for, will supervise <i>and do the work</i> for this permit: (Reference the “Who Can Pull a Permit document and Required Credentials”)		
<input type="checkbox"/> Homeowner / Property Owner <ul style="list-style-type: none"> Tax Bill and/or Deed filed with County Required Stated Issued ID Required 	<input type="checkbox"/> Contractor (if To Be Determined please check <input type="checkbox"/>) <ul style="list-style-type: none"> Current Business License Required Copy of State Certification (if applicable) Required State Issued ID Required 	
<p>The signature below is a binding statement that the permit holder will be responsible for and supervise the job at the permitted address and that the Property Owner is aware of, agrees with and has granted permission for this permit to be applied for and issued.</p>		
Signature of Permit Holder (or agent): _____ Date: _____		
Who is submitting this application:		
<input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Designer / Engineer / Architect <input type="checkbox"/> Permit Expeditor <input type="checkbox"/> Agent for Permit Holder		
AGENT FOR PERMIT HOLDER: (All Contact Information Required! Authorized Agent Form required!)		
Name:		Phone:
Address (Physical / No PO Boxes):		
City:	State:	Zip:
Email:		
PROPERTY OWNER: (REQUIRED – APPLICATION WILL NOT BE ACCEPTED WITHOUT PROPERTY OWNER’S INFORMATION!)		
Name:		Phone:
Address (Physical / No PO Boxes):		
City:	State:	Zip:
Email:		
CONTRACTOR: (All Contact Information Required - if To Be Determined, please check <input type="checkbox"/>)		
If contractor is to be determined, an ‘ASSIGNING CONTRACTOR TO PERMIT AFTER SUBMISSION’ form must be submitted with updated information and signatures before permit can issued.)		
<input type="checkbox"/> State Certified Contractor	<input type="checkbox"/> Specialty Trade (Roofer, Concrete, Siding, Sheetrock, Fence, Windows, etc...)	
Name:		Phone:
Company Name:		Phone (Company):
Address (Physical / No PO Boxes):		
City:	State:	Zip:
Email:		
Business License #:		State Card # (if applicable):
DESIGNER / ENGINEER / ARCHITECT / PERMIT EXPEDITER (If applicable):		
<input type="checkbox"/> Designer <input type="checkbox"/> Engineer <input type="checkbox"/> Architect <input type="checkbox"/> Permit Expediter		
Name:		Phone:
Company Name:		Phone (Company):
Address:		
City:	State:	Zip:
Email:		

CONTACT INFORMATION