



**CITY OF SAN BERNARDINO**  
**Community & Economic Development Department**  
**Planning Division**  
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 San Bernardino, CA 92401  
 Phone (909) 384-7272  
 Web address: www.sbcity.org

## FENCE/WALL PERMIT APPLICATION

**Project Site Address:** \_\_\_\_\_ **APN:** \_\_\_\_\_

**Applicant (s):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Property Owner (If different from applicant):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Application Submittal Requirements:**

A plot plan drawing is required showing the following:

- All property lines and the length of the property lines
- Location and height of proposed fencing/wall(s)
- Type of materials used for the fencing/wall(s)

**Additional Forms (If Applicable):**

- Common property line Fence/Wall Agreement

By signing this Fence/Wall Permit Application, I agree to hold the City of San Bernardino and its elected officials and appointed officials, agents, and employees harmless from liability for damage or claims for personal injuries, including death, and claims for property damage or loss which may arise from the direct or indirect construction, use, placement or maintenance of the fence/wall which is the subject of this Fence/Wall Permit Application. I agree to and shall defend the City and its elected and appointed officials, officers, agents, and employees with respect to any and all actions for damages caused by or alleged to have been caused by reason of the issuance of the Permit described herein, the construction, placement or maintenance of the subject fence/wall, or any dispute amongst or between any property owners as to the placement of the subject fence/wall or the location of the true property line separating the properties.

I hereby state that I am the property owner or authorized representative and certify, under penalty of perjury, that the information filled in above is correct. I agree to comply with all applicable State, County, and City of San Bernardino laws, including conditions of approval.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

**OFFICE USE ONLY**

Date Issued: \_\_\_\_\_ Fence/Wall Permit No.: \_\_\_\_\_

Receipt No.: \_\_\_\_\_ Receipt Amount: \$ \_\_\_\_\_ Issued By: \_\_\_\_\_