



Town of Bernalillo

"The City of Coronado"

APPLICATION FOR PERMIT (Fence, Wall, or Sign)

INSTRUCTIONS: Please type or print clearly and attach the following:

1. A drawing of the proposed fence, wall, or sign that includes dimensions, colors, height, and material/s.
2. A diagram showing the proposed fence, wall, or sign and where it will be located on the property relative to property lines and roadways.

PROPERTY ADDRESS: _____

TYPE OF PERMIT REQUESTED and VALUE:

- Fence/Wall (over 6 feet from grade) \$ _____
- Sign/s \$ _____

PROPERTY OWNER or PERMITTEE:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

CONTRACTOR/INSTALLER:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

STATE LIC. #: _____ STATE TAX #: _____

SIGN TYPE:

SIGN TYPE	ILLUMINATION (Indirect I, None N)	NUMBER of Signs	DIMENSIONS (Height x Length)	SQUARE FOOTAGE (Area of Each Sign)	TOTAL SQUARE FOOTAGE
Canopy					
Freestanding Monument					
Freestanding Pole					
Marquee					
Projecting					
Roof					
Temporary					
Wall-Mounted					
Other					

I HEREBY ACKNOWLEDGE THAT THIS APPLICATION IS CORRECT AND I AGREE TO COMPLY WITH ALL TOWN ORDINANCES. I UNDERSTAND THAT THIS PERMIT SHALL NOT BE VALID WITHOUT FULL KNOWLEDGE AND AGREEMENT OF THE PROPERTY OWNER. I UNDERSTAND THAT THE ISSUANCE OF THIS PERMIT SHALL NOT PREVENT ZONING ENFORCEMENT FROM THEREAFTER REQUIRING CORRECTION OF VIOLATIONS. FINALLY, I UNDERSTAND THAT THIS PERMIT IS NOT VALID UNTIL THE FEE IS PAID AND THAT THE WORK UNDER THIS PERMIT MUST BE COMPLETED WITHIN SIX (6) MONTHS, OR THE PERMIT MUST BE RENEWED.

X _____
SIGNATURE DATE

OFFICIAL USE ONLY

ZONE CLASSIFICATION: *(Check one)*

R-R		R-1		R-1A		R-2	
C-R		C-1		M-1		S-U	

HISTORIC OVERLAY ZONE? *(Circle one)* YES NO
IF YES, REFER TO MAINSTREET OVERLAY DISTRICT- DESIGN GUIDELINE

BUILDING CODE:
Building And Safety Inspection Required? YES NO
(Yes, if steel or reinforced footings other than concrete)

Separate Electrical Inspection Required? YES NO
(If Yes, Refer Applicant to City of Rio Rancho for Electrical Permit)

- PERMIT APPROVED
- PERMIT NOT APPROVED

Signature: _____ Date: _____

Comments: _____

FEES:	Zoning Review	\$ 15.00
	Wall/Fence (4.35% of construction value)	\$ _____
	Sign/s (See Fee Schedule/Valuation of Sign)	\$ _____
	TOTAL	\$ _____

Amount Received \$ _____

Receipt Number _____

Received By: _____ Date: _____