

Central Building Authority 117 North Front Street 2nd Floor Beliz City, Belize, Central America Tel.: 223-2616 or 223-1878 Fax: 223-5738 Email: centralbuildingauthority@yahoo.com Website: www.cbabelize.com



36/38 TRINITY BOULEVARD CITY OF BELMOPAN PHONE: 501-822-2271/ 501-822-2319 FAX: 501-822-3992



APPLICATION TO REVIEW

F:					
I/V	We hereby apply	y for permission to erect a Fence in accordance with the following information and as			
sh	shown on the accompanying drawings:				
1.	Legal description (street address or similar description that will readily identify and definitely locate				
	the proposed f	fence:			
2.	Legal Owner	of Property:			
3.	Name of Proj	ject Owner:			
4.	· ·	dress and contact information (telephone/cell, facsimile & email) of Project Owner			
	i.	Address:			
	ii.	Telephone/Cellphone:			
	iii.	Facsimile:			
_		E-mail:			
5.	Plot/Lot/Parce				
		Dimension:			
		Length:			
		Perimeter:			
_		Girth/Circumference:			
6.	Height:				
		Above finished ground level:			
7	11.	Below finished ground level:			
7.	Construction:				
	1.	Foundation:			
		337 11			
	11.	Wall:			

8. Guidelines

- i. Height shall not exceed six (6) feet, unless otherwise agreed.
- ii. The upper part shall ensure that visibility to opposite side is not impaired.
- **iii.** At boundary with an adjacent property the center line shall coincide with the center of the thickness of the fence.
- **iv.** At boundary with a thoroughfare the outer face shall be in line with the outer face of the survey marker (monument).
- v. A detailed drawing shall accompany each application.

9.	Technicians, Architects and /or Engineers of Record:				
	I, the undersigned accept full responsibility for the correctness of the Technical Information				
	submitted on this Application Form, I also accept full responsibility for the correctness and suitability of the information provided in the other documents submitted along with this Application Form.				
	1. Name of Technician (<i>Print Name</i>)				
	Address:				
	Signature:				
	2. Name of Architect (<i>Print Name</i>)				
	Address:				
	Signature:				
	3. Name of Engineer (<i>Print Name</i>)				
	Address:				
	C: an atoma				

10. I	accept responsibility for applying				
to the Building Inspector-Project Review- Belmopan Local Building Authority for the following					
inspections/permits:					
Inspections/Permits					
1. Notice of intention to commence building works;	4. Inspection: Walls, columns and beams;				
2. Inspection: Setting out;	5. Application for permit to use fence ;				
3. Inspection: Foundation, excavation and foundation placing;					
The Professional of Record to review and sign the Application Form.					
I certify that this application has the consent of the Owner of the property:					
Name of Property Owner or his authorized agent:					
Address of Property Owner or his authorized agent:					
Phone Number:Fax	Number:				
E-mail address:					
Signature of Property Owner or his authorized agent:					
Date:					