



CITY OF NEW FAIRVIEW  
999 ILLINOIS LANE  
NEW FAIRVIEW TX, 76078  
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**ZONING PERMIT APPLICATION**

**PROJECT LOCATION ADDRESS:** \_\_\_\_\_

**TAX ID:** \_\_\_\_\_ **ZONE:** \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_

**STREET** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**DAY PHONE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_

**STREET** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**DAY PHONE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**Existing Use of Property** \_\_\_\_\_ **Proposed use of Property** \_\_\_\_\_

**Description of work proposed:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Construction Cost\$:** \_\_\_\_\_ **as the property on a corner lot?** \_\_\_\_\_

**Fees (All fees are nonrefundable) all fees are due upon application submission. Checks made payable to the City of New Fairview.**

Office Use Only:

Date Paid: \_\_\_\_\_ Amount: \$\_\_\_\_\_ Check # \_\_\_\_\_