

FENCE PERMIT

Date Received _____
Date Issued _____

Jurisdiction _____ Permit No. _____

Permit Address _____ Residential Commercial

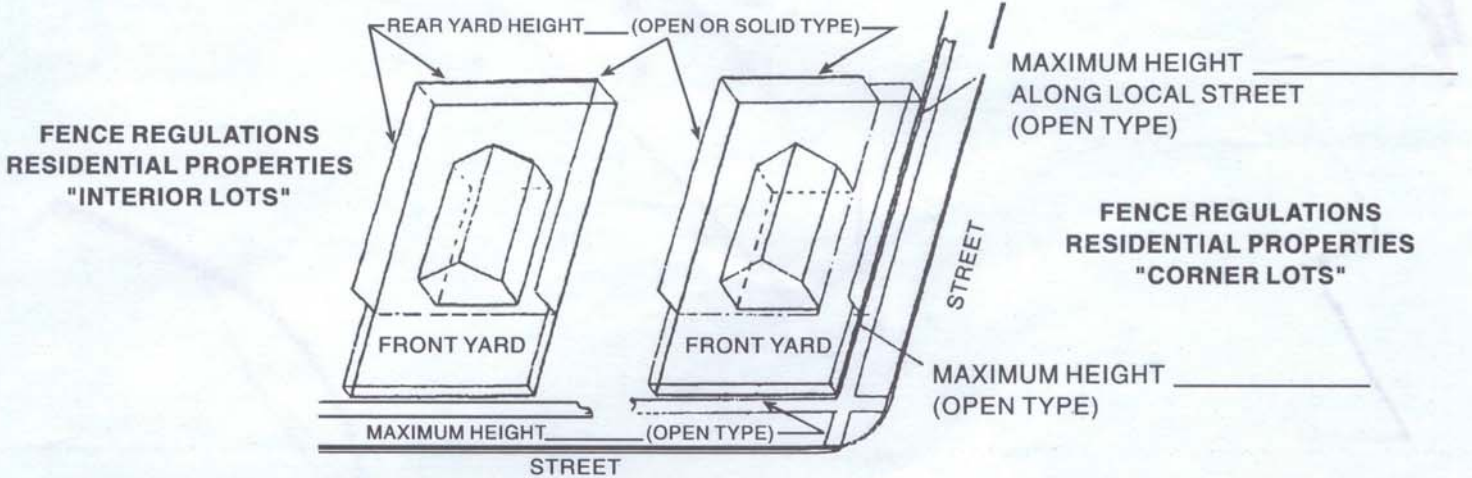
Owner of Property _____ (print) Phone: (Home) _____ (Work) _____

Plat of Survey Yes No Other Information _____

Wood Chain Link Plastic Other _____

Height _____ Length _____ No. of Gates _____ Style _____
(shadow box, picket, stockade, split rail)

Location on Lot (front, sides, back) _____



Finished Side out. No fence shall be located closer than 12 inches to a public walk.

Fence Contractor _____ Phone _____ Cost of Work _____

Address _____ Cost of Permit _____

UNDER PENALTIES OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the Building and Zoning Ordinances of the municipality and all amendments thereto. I realize that the information that I have affirmed hereon forms a basis for the issuance of a building permit.

Applicant Signature _____

Date of Application _____

Approved by _____ Date _____

Required Inspections: 1-Post Holes, 2-Final

24-HOUR NOTICE IS REQUIRED ON ALL INSPECTIONS

For Inspection Call ~~607-462-1111~~ 877)551-4224