

FENCE PERMIT APPLICATION
FEE: \$50.00

DATE:_____

RECEIPT #_____

RESIDENT:_____

RESIDENT PHONE:_____

ADDRESS:_____

CONTRACTOR:_____

CONTRACTOR ADDRESS:_____

CONTRACTOR PHONE No:_____

FENCE TYPE/ COST:_____

FENCE HEIGHT (FRONT):_____

FENCE HEIGHT (BACK):_____

*****NOTICE*****

Fence may not exceed 4ft in height in front yard. Fence must be see through type material in front yard. If fence interferes with door to door delivery of mail, it must be removed or modified at owner expense. Fence must not exceed 8ft in height in back yard.

I hereby accept all conditions herein above mentioned and certify that all statements herein recorded by me are true.

SIGNATURE:_____