

FENCE PERMIT



APPLICATION MUST INCLUDE PLOT PLAN SHOWING
 PLACEMENT OF PROPOSED FENCE IN RELATIONSHIP
 TO PROPERTY LINE(S) AND BUILDING(S).

PLANNING DEPARTMENT
 100 S Market St. Troy, OH 45373
 Phone (937)339-9481, Fax (937)339-9341
www.troyohio.gov

1 LOCATION OF PROJECT		Address of Project		Date Received	
		Material of Fence			
2 REQD INFO		Names (Please <u>Print</u>)		Mailing Addresses – Street, City, Zip Code	
APPLICANT					
CONTRACTOR					
PROPERTY OWNER					
3	Is fence to be built on: -Corner lot -Alley to the rear -Through lot -Limited access	4	Will this fence add to or connect to an existing fence? YES / NO	5	If applicable, what are the materials of the existing fence?
6	Height of fence in rear yard	7	Height of fence in side yard	8	Height of fence in front yard
9	Approximate cost of project	10	Do the adjoining neighboring properties currently have an existing fence? YES / NO		

11 SIGN YOUR FULL NAME		
I HEREBY CERTIFY THAT THE ABOVE INFORMATION AND ATTACHMENTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO ACKNOWLEDGE THAT PROVIDING INNACURATE INFORMATION ON THIS APPLICATION OR ATTACHMENTS MAY INVALIDATE THE APPLICATION OR SUBSEQUENTLY APPROVED PERMIT. SIGNING THIS APPLICATION ALLOWS A REPRESENTATIVE OF THE CITY OF TROY TO ENTER THE PROPERTY FOR INSPECTION PURPOSES. Signature of applicant _____ Date: _____ Fax No. _____	FEES	TOTALS
	TOTAL AMOUNT DUE	\$10.00
	TOTAL AMOUNT PAID	
	DATE PAID	RECEIPT NUMBER
OFFICE USE ONLY		
ZONING DISTRICT	HISTORIC DISTRICT Yes No	FLOOD ZONING A B C

REQUIRED SETBACK: FRONT: _____	BACK: _____
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APPROVAL CONTINGENT UPON THE FOLLOWING:

PERMIT ISSUED BY:

• REFER TO PERMIT NO: _____	• DATE: _____
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