

Fencing Permit Application

Applicant:			
Name:		Phone Number	
Address:			
Contractor:			
Company Name:		Phone Numb	er:
Company Address:_			
Fence Material Type	e: Chain Link	Composite Plastic	Other
Post Material Type:			
U Wood	Steel	Composite Plastic	Other
Type of Fence:			
Boundary	Ornamental	Containment	Other
Height of Fence	ft. (Max	imum height is 6ft in the	rear and sides, 3ft in the front)
Approx. Total Pro	ject Cost: \$		
Project Completic	on Date: / /	/	
Signature of Applicant			Date
Signature of Adjacent Property Owner (If applicable)			Date
Approved by Directo	r of Public Works		
Signature			Date

Permit expires 6 months from issuance. Please attach a layout of the fence to this application.

The issuance of this permit by the Director of Public Works does not in any way indicate that any requirements imposed by the State of Wisconsin, or any other governmental agency, have been complied with by the above applicant. The sole purpose of this permit is to assure compliance with the City of Greenwood Building and Zoning regulations. The City will not be responsible to ensure compliance with any other governmental rule or regulation regarding the proposed activity of the applicant regarding the said property. The applicant is hereby notified that the proposed activity may require other permits and inspections not covered by this permit.

The application fee is \$25 please make checks payable to <u>City of Greenwood</u>. Thank you!