City of Gaylord

FENCE PERMIT APPLICATION

Applications Will Not Be Processed Until All Requested Information Has Been Provided

Property Owner Name:		Pł	Phone Number:	
Property Owner Address:				
Property Address When	e Fence Will Be Constru	cted: (If Different Th	an Address Above)	
Type of Fence to Be Co	nstructed:			
□ Wood (Privacy)	□ Wood (Picket)	ם Chain Link	ם Wrought Iron	
ם Vinyl (Privacy)	ם Vinyl (Picket)	ם Other:		_
Fence Color:		Fence Height:		_
Fence Location: D Prin	nary Front 🛮 🗅 Side Yard	l □ Rear Yard		
_	Checklist: required in order to produce 12" off of Property Line	cess and approve you	ır request.	
	iling the position of the p	roposed fence in rela	ation to buildings, structures, existing	
all Measureme د	ents			
• •	above statements are tr		e received and read a copy of the City o ordinance.	f
Applicant Signature:			Date:	
Approved D Permit Fee Paid? D Yes		son:		_
Zoning Administrator Signature	gnature:		Date:	