

CITY OF ROYAL OAK
BUILDING INSPECTION DEPARTMENT
Fence Permit Application

PLAN REVIEW: \$30.00

PERMIT FEE: \$35.00

JOB SITE ADDRESS _____	DATE _____
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PROPERTY OWNER INFORMATION: REQUIRED

NAME OF OWNER (PLEASE PRINT):			
OWNER ADDRESS:	CITY	STATE	ZIP CODE
OWNER TELEPHONE NUMBER: ()	FAX NUMBER: ()		

CONTRACTOR INFORMATION: IF APPLICABLE

NAME (PLEASE PRINT):			
ADDRESS:	CITY	STATE	ZIP CODE
TELEPHONE NUMBER: ()	FAX NUMBER: (REQUIRED) ()		

APPLICANT SIGNATURE: THE UNDERSIGNED ACKNOWLEDGES READING AND UNDERSTANDING THIS APPLICATION. THE APPLICANT CERTIFIES THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND HAS BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT. ALL WORK WILL COMPLY WITH THE CITY OF ROYAL OAK FENCE ORDINANCE.

SIGNATURE	DATE :
PLEASE PRINT:	

- APPLICANTS MUST PROVIDE TWO (2) COPIES OF A DRAWING THAT SHOWS THE FOLLOWING (at a minimum):**
- The location of the fence in relation to the house and property lines.
 - All streets adjacent to the property.
 - All abutting fences on adjacent property.
 - The height and material of the proposed fencing.
 - Homes adjacent to the subject property must be shown, including which direction they face.
 - Vacant or other property uses that are adjacent to the property.

For office use only:	PERMIT NUMBER:
APPROVED BY INSPECTOR: _____	DATE: _____