

TOWN OF GLOVERTOWN
Application To Erect Or Repair Fence

Name of Applicant: _____

Address of Applicant: _____

Telephone Number: _____

Height of Fence: _____

Materials to be Used: _____

Location: _____

Estimated Cost: _____

Distance from Street Line/Property
Boundary (if applicable): _____

Estimated Start Date: _____

I, _____ hereby apply for permission to erect a fence. I declare that all of the information given above is true and correct to the best of my belief and that the fence will be erected in accordance with Municipal Fence Regulations.

Permit Number: _____ Date: _____ Signature: _____

For office use only:

Approved: _____ Rejected: _____ Permit No: _____

Comments: