

CITY OF ELYRIA RESIDENTIAL FENCE APPLICATION

Job Location	Date Stamp
Address _____	
Lot/Unit/Suite No. _____ Subdivision _____	

Owner Information

Name _____ Address _____

City _____ State _____ Zip Code _____

Phone (_____) _____ Mobile (_____) _____ Email _____

Contractor Information

Name _____ DBA _____

Address _____

City _____ State _____ Zip Code _____

Phone (_____) _____ Mobile (_____) _____ Email _____

Fence Fees

Height _____ Length _____ Type _____

A. 6 feet or less in height at a 100 feet or less in length.	\$ 20.00	
B. 6 feet or less in height and more than 100 feet in length.	\$ 30.00	
C. Over 6 feet in height.	\$ 35.00	
a. Plus \$7.00 per 100 linear feet or fraction thereof.		
Subtotal		
State Fee 0% of Subtotal	0.00	\$ _____
Total Cost		(Cost of Proposed Work)

A site (plot) plan must accompany this application.

_____ Date. _____

Signature of Owner, or Agent Responsible for Work Check if Owner Check if Agent

Date Approved. _____ Inspectors Initials. _____ Zoning _____ Receipt No. _____ Permit No. _____

Date Denied. _____ Comments. _____