Muskingum Township 26 Townhall Road Marietta, Ohio 45750

Phone: 740-373-0189 Fax: 740-373-8963. Website: www.muskingumtwp.org

APPLICATION FOR FENCE PERMIT

Applicant:	Phone #:				
Address	City	State:	Zip:		
Property Address — if different then above					
Address	City	State:	Zip:		
Contractor / Builder:		Phone #:			
Type of Fence:					
Fence Location, Height and Length					
Front Height:	Feet, Length:	Feet			
Side Height:	Feet, Length:	Feet			
Side Height:	Feet, Length:	Feet			
Rear Height:	Feet, Length:	Feet			
	Total Length:	Feet			

A site plan (drawn to scale) must be submitted with this application showing the size and location of the lot, the actual Property Lines*, any applicable right of ways and easements, the location, length and height of the fence and locations of the existing buildings or structures on the lot.

*Property Lines are determined by surveyor's property line pins and are not determined by the edge of road pavement or walkways.

It is understood and agreed by the applicant that any error, misstatement or misrepresentation of fact or expression of fact, either with or without intention on the part of the applicant, that might, or would cause the issuance of a permit in accordance with this application, shall constitute sufficient grounds for revocation of such permit at any time. All provisions of the Muskingum Township Zoning Resolution, and all other applicable regulations shall be complied with whether specified herein or not. Muskingum Township reserves the right to order the removal, reconstruction, relocation, or repair of any work not to the specifications of this permit at the owner's expense.

By signing this Zoning Permit, the applicant gives consent to the Zoning Inspector to enter upon the property, at a reasonable hour, for the purposes of verifying conformance with this Zoning Permit. The applicant also acknowledges that any changes concerning the information as shown in this application such as location, size, setback, yard clearance, etc. must have approval of the Zoning Inspector. Failure in this respect shall constitute sufficient grounds for revocation of this permit.

I have read the statements made herein and certify that they are true. I will notify the Zoning Inspector immediately upon completion of this project in order to allow for inspection as to

compliance to this application including the site plan.

PERMIT EXPIRES ONE YEAR (1) FROM DATE OF ISSUANCE IF CONSTRUCTION HAS NOT COMMENCED.

Permit Fee <u>\$50</u>	.00 Plus .10 per Lir	near foot	= \$
	Checks are pay	able to: Muskingur	m Township
Signature of Land C	wner/Agent		Date
•	mit, application must be and fee are then taken		oning Inspector. Approved
• .	Bichard - 740-629-518		
Zoning Clerk – Laura	Bradley, 740-538-2301	or lauramtta@hotma	ail.com
		g Office Use Only	
Date Application rece	eived: D	ate Action taken on	Application:
Site Plan Drawing is	included with this ap	plication? Yes	No
[] Approved [] Den	ied If Denied, Reason	for Denial:	
Zoning Inspector Sign	ature:		
Payment Date:	Amount:	Check #:	Zoning Clerk Initials: