



# FENCE PERMIT APPLICATION

13234 Main Street, PO Box 354 Weston, Ohio 43569

419-669-3224 | 419-669-0501 (FAX)

clerk@westonohio.org | [www.westonohio.org](http://www.westonohio.org)

APPLICANT INFORMATION			
Applicant is: <input type="checkbox"/> Fence Contractor <input type="checkbox"/> Property Owner <input type="checkbox"/> Other			DATE
APPLICANT NAME		PHONE NUMBER	
APPLICANT ADDRESS		CITY	STATE ZIP
NAME OF FENCE COMPANY		STATE LICENSE #	
I WOULD LIKE MY APPROVED PERMIT...			
<input type="checkbox"/> Emailed: _____		<input type="checkbox"/> Mailed or <input type="checkbox"/> Will Pick Up In Person	
PROPERTY INFORMATION			
SITE ADDRESS			Is this a new home? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME OF BUSINESS (if applicable):			
TYPE OF PROPERTY:			
<u>Residential</u>		<u>Non-Residential</u>	
<input type="checkbox"/> Single-Family	<input type="checkbox"/> Two-Family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Institutional <input type="checkbox"/> Other: _____
<input type="checkbox"/> Townhouse	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Church	<input type="checkbox"/> Public
TYPE OF FENCE:	MATERIAL OF FENCE:	FENCE HEIGHT (including posts):	
<input type="checkbox"/> Privacy	<input type="checkbox"/> Wood	<input type="checkbox"/> Front Yard _____	
<input type="checkbox"/> Pool Enclosure	<input type="checkbox"/> Iron	<input type="checkbox"/> Side Yard _____	
<input type="checkbox"/> Kennel	<input type="checkbox"/> Split Rail	<input type="checkbox"/> Rear Yard _____	
<input type="checkbox"/> Decorative <input type="checkbox"/> Other:	<input type="checkbox"/> Metal/Chain Link	<input type="checkbox"/> Lineal Feet of Fence _____	
<input type="checkbox"/> Plastic	<input type="checkbox"/> Other:		
PROJECT INFORMATION:			
Have the corner monuments been found and the property lines defined?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Would the finished side of the fence face towards adjoining properties/streets?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you replacing an existing fence?			<input type="checkbox"/> Yes <input type="checkbox"/> No
ACKNOWLEDGMENT AND SIGNATURE			

*I have included a drawing and have been provided and read the Fencing provisions and hereby apply for a fence permit and acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the Village of Weston, Ohio.*

APPLICANT'S SIGNATURE			DATE SIGNED	
OFFICE USE ONLY				
STAFF COMMENT:		PERMIT #:		PERMIT FEE: \$10.00
DATE RECEIVED:	AUTHORIZATION TO ISSUE:	DATE OF ISSUE:	RECEIPT #:	PAID <input type="checkbox"/> CHECK # _____
ZONING DISTRICT:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	PROCESSED BY:	PERMIT SENT VIA:	<input type="checkbox"/> CASH
	ADDRESS VERIFIED: <input type="checkbox"/> YES <input type="checkbox"/> NO			<i>Checks can be made payable to the Village of Weston.</i>