

VILLAGE OF MANCELONA

120 West State St

PO Box 648

Mancelona, MI 49659

Phone: (231) 587-8331 Fax: (231) 587-5730

ZONING PERMIT APPLICATION - FENCE

Property Address: _____

Zoning District: _____

Parcel Number: _____

Applicant: _____

Property Owner: _____

Applicant Address: _____

Property Owner Address: _____

Phone: _____

Email: _____

Rent: _____ Own: _____ (mark one)

Proposed Use: _____

Type of Fence: _____ (all fences require a permit, except living fences)

Height of Fence: _____ (Per Section 2.20 may not exceed six (6) feet in the side or rear yard and shall not exceed four (4) feet in height in the front yard.)

NOTE: A drawing showing a sketch of your property boundaries, existing building(s) and the proposed fence location and the distance from the property lines is required. Include photo or sketch of proposed fence material.

Include property owner authorization letter and signature.

My signature below indicates that I am the owner of this property, or that I am authorized by the owner to act in this matter, and that all information contained in this permit application is accurate and truthful. I agree to allow the Village of Mancelona Zoning Administrator reasonable access to this property to verify setbacks and related matters, per Village of Mancelona Zoning. I agree to comply with the conditions and regulations provided with any permit that may be issued. I agree the permit that may be issued is with the understanding all applicable sections of the Village of Mancelona Zoning Ordinance will be complied with.

Signed: _____ Date: _____

() OWNER () APPLICANT

For Village Use Only

Fee Paid: \$ _____

Date Received: _____

Received By: _____

Inspection Date: _____

Approved: _____ Denied: _____

Permit #: _____ Date Issued: _____ ZA signature: _____