





OFFICE USE ONLY Date Received:			
Receipt #:			
Zoning:			

FENCE APPLICATION

PROPERTY OWNER IS RESPONSIBLE FOR ENSURING THAT ALL FENCES ARE ERECTED WITHIN THEIR LEGAL PROPERTY BOUNDARIES

A DOLLGANIT CONTA CT INICODA	ATION		
APPLICANT CONTACT INFORM Name:	AHON		
Mailing Address:		Postal Co	ode:
Phone Number:		1 Ostal Ct	ouc.
Email:			
2			
SPECIFICATIONS			
Materials to be used for fence	·		
Height of fence (attach drawin		d measurements):	:
Any building other than reside			
If yes, number of feet from all	existing structures:		
Number of feet from existing r	oad:		
Number of feet from center lir	ne of road:		
Distance from fire hydrant (if a	applicable):		
Date of commencement:			
Estimated date of completion:			
PLANS AND SPECIFICATIONS, HER	RE WITHIN SUBMITTED.	. ALL PROVSIONS O	ORDING TO THE FOLLOWING STATEMENT AN DET THE ABOVE NOTED FACTS AND TOWN OF THE SAID FENCE, IF SPECIFIED HEREIN OR
solemnly declare that the plans, sof my belief to the requirements	specifications and state of the above noted reg make this solemn decla	ments herein contagulations and are m	rovince of Newfoundland and Labrador, do ained in the said application conform to the bade with full knowledge of the circumstance usly believing it to be true, and knowing that
DATED AT	THIS	DAY OF	, 20
Signature:		Witness Signature	o: