

**FENCE PERMIT APPLICATION
CITY OF HAMMOND**

PERMIT # _____

FILING DATE: ______

APPLICANT NAME: _____
First Name MI Last Name

COMPANY NAME: _____ Owner Contractor Other

Applicant Mailing Address: _____
Street Address or PO Box City State Zip

Applicant Telephone: (____) _____ Applicant Fax: (____) _____

PARCEL# _____ (PLEASE VERIFY PARCEL ADDRESS & # W/GIS DEPT.)

SITE LOCATION: _____
Street Address Number & Street Name

Where did you get this address? Post Office City Building Dept. 911 Office Other _____
Please specify.

PROPERTY OWNER NAME: _____
(If different than Applicant Name above.) First Name MI Last Name

COMPANY NAME: _____

Owner Address: _____
Street Name/Street Number City State Zip

Telephone: (____) _____ Fax: (____) _____

FLOOD ZONE:
 Zoning Requiring Elevation Certificate: A AE AO AH A1-A30 A99 B
 Zoning Not Requiring Elevation Certificate: C X

FLOODWAY: YES NO If subdivision, what is the LOT # _____.

ZONING: AL B1 B2 C1 C2 C3 C4 C4A H I L R4 R5 R5S R8 R11 RA RP RS S

CONTRACTOR NAME: _____
First Name MI Last Name

COMPANY NAME: _____ **CONTRACTOR TYPE:** _____

LOCAL LICENSE # _____ Exp.Date ___/___/___ STATE # _____ Exp.Date ___/___/___

Address: _____
Street Name or PO Box City State Zip

Telephone: (____) _____ Fax: (____) _____

PERMIT INFORMATION-Description Is fence a pool barrier? _____

FENCE SIZE: _____ Ft. Length _____ Ft. Width _____ Ft. Height

Fence will be constructed of: _____
 CROSS LINK BRICK WOOD OTHER (Please Describe): _____

Approximate Cost: \$ _____

ATTENTION; APPLICANT - I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of permit does not presume to give all authority to violate or cancel the provision or any other state or local law regulating construction or performance of construction.

X _____
Signature of Owner (if Owner Builder) OR Contractor OR Agent **Date**

*****FOR OFFICE USE ONLY*****

APPROVAL: _____
Building Official, City of Hammond **Date**
 or **Building Inspector**
 or **Code Enforcement Officer**

Permit Fee:	Commercial \$ 50.00	Residential \$ 10.00	PAID CASH <input type="checkbox"/>	PAID CHECK # _____	DATE PAID ___/___/___
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