

**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: (_____) _____

Email: _____

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: (_____) _____

Email: _____

PERMIT INFORMATION-Description Is fence a pool barrier? _____

FENCE SIZE: Fence will be constructed of:

_____ Ft. Length	CROSS LINK	BRICK
_____ Ft. Width	WOOD	OTHER (Please Describe): _____
_____ Ft. Height		

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	PAID CASH <input type="checkbox"/> PAID CHECK # _____ DATE PAID ___/___/___
Residential \$ 10.00	