



Light-Ashburn Memorial Building
102 Willow Street
New Richmond OH 45157

APPLICATION FOR FENCE

PERMIT FEE \$20.00

PAYABLE TO: VILLAGE OF NEW RICHMOND

ALL INFORMATION ON THIS FORM MUST BE COMPLETED ALONG WITH A CURRENT SITE PLAN
BEFORE ZONING PERMIT WILL BE ISSUED

NAME _____

ADDRESS _____ EMAIL _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PROJECT ADDRESS _____ PARCEL ID# _____

CITY _____ STATE _____ ZIP _____

CONTACT NAME (IF DIFFERENT) _____

ADDRESS _____ EMAIL _____

CITY _____ STATE _____ ZIP _____ PHONE _____

EST. VALUE OF FENCE \$ _____ ZONING CLASSIFICATION _____

TYPE OF FENCE _____

HEIGHT _____ LENGTH (IN FT.) _____

****FENCES MAY BE CONSTRUCTED IN FRONT YARD NOT TO EXCEED 4FT. IN HEIGHT AND HAVE 40% OPEN SPACE. FENCES IN REAR AND SIDE YARD HAVE A MAXIMUM OF 6FT. NOT TO BE CONSTRUCTED IN PUBLIC RIGHT-OF-WAY. PLEASE CHECK WITH YOUR HOA FOR APPROVAL-IF APPLICABLE.**

SETBACK FROM PROPERTY LINE: FRONT _____ REAR _____ R-SIDE _____ L-SIDE _____

(MEASURE FROM STANDING AT FRONT OF HOUSE LOOKING AT STREET)

THIS PERMIT SHALL EXPIRE AND MAY BE REVOKED IF WORK HAS NOT BEGUN WITHIN ONE (1) YEAR AND/OR COMPLETED WITHIN TWO (2) YEARS.

ANY ERROR, MISSTATEMENT OR MISREPRESENTATION OF FACT(S), WITH OR WITHOUT INTENT TO DEFRAUD, SHALL BE GROUNDS FOR REVOCATION OF SAID PERMIT.

APPLICANT'S SIGNATURE _____ DATE _____
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THIS APPLICATION, SITE PLAN(S) AND FEES CAN BE MAILED OR HAND DELIVERED TO:

VILLAGE OF NEW RICHMOND

102 WILLOW STREET

NEW RICHMOND, OHIO 45157

PHONE: 553-4146
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ZONING DEPARTMENT INFORMATION

APPROVED _____ DENIED _____ (REASON _____) DATE _____

FEE PAID \$ _____ CHECK # _____ CASH _____ RECEIPT # _____

SIGNED BY: _____ TITLE: _____

Permit # _____ AC # _____