P.O Box 830 FAX (

TOWN OF MANCHESTER

3337 Victory Street
P.O BOX 830
MANCHESTER, MD 21102
PHONE: (410) 239-3200 FAX: (410) 239-6430
WEBSITE: MANCHESTERMD.GOV

FENCE PERMIT APPLICATION

PROPERTY OWENR'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

_____

PROPERTY OWNER'S PHONE NUMBER: _____

ADDRESS OF PROPERTY: _____

_____

CONTRACTOR'S NAME: _____

CONTRACTOR'S ADDRESS: _____

CONTRACTOR'S PHONE NUMBER: _____

TYPE OF FENCE: _____

FENCE HEIGHT: _____

The undersigned acknowledges review of the requirements for Ordinance 250-26F(4) as it pertains
Fences , trees, and planted barriers.
Please attach a plat or other depiction of the subject property showing the proposed fence location to this application.

PROPERTY OWNER SIGNATURE _____

DATE._____

FOR TOWN OFFICE USE ONLY

ZONING OF PROPERTY: _____

APPROVED _____ DATE _____
Zoning Administrator

DISSAPPROVED _____ DATE _____
Zoning Administrator