

Issue Date _____
Tax Parcel No. _____
Permit Fee _____
Expiration Date . _____

Zoning District _____
Permit No. _____

Date Stamp _____

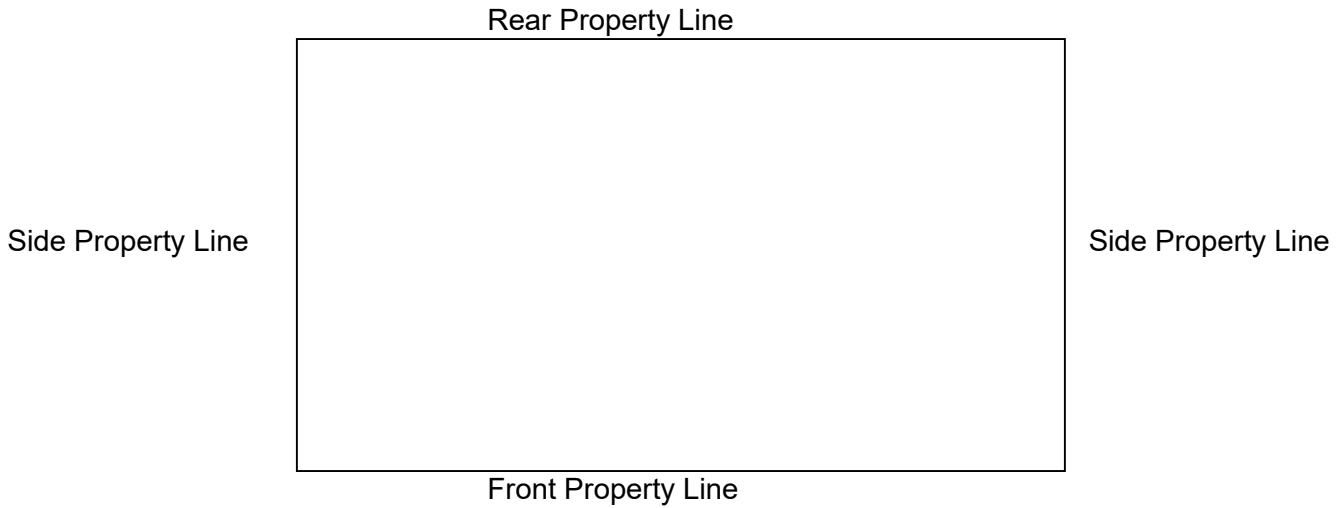
ZONING PERMIT APPLICATION FACT SHEET

Fence Construction
(for fences 6 ft. or less in height only)

Municipality West Sadsbury Township
Name _____
Phone No. _____
Address _____
Subdivision _____ Lot No. _____

Contractor _____
Phone No. _____
Address _____
Cell No. _____
Estimated Cost _____

I. Complete the diagram. Show setback lines for existing structures – building, etc. and proposed fence construction. **Fence cannot be placed in any easements.**



NOTE: If applicable, you must show location of on-lot septic system

- II. **Fence:**
- Type of Fence: Split Rail Privacy Fence Chain Link Other _____
 - Proposed Fence Height: _____ ft. _____ in.
 - Distance fence will be from property lines: _____ ft. _____ in.

Note: No fence can be installed in any Utility and/or Drainage Easement

FINAL INSPECTION REQUIRED - CALL TECHNICON ENTERPRISES INC., II (610)286-1622

APPLICANT

DATE

INSPECTION APPROVED INSPECTION DISAPPROVED

CODE ENFORCEMENT/ZONING OFFICER APPROVAL

DATE

INSPECTION DATE _____