Community Development & Planning
City of Jasper
610 Main Street I PO Box 29
Jasper, IN 47547-0029
(812) 482-4255 I Fax (812) 482-7852
www.jasperindiana.gov

FENCE PERMIT APPLICATION

PART A IDENTIFICATION	
Owner Name	
Fence Location Address	
Legal Description of Property	
Contact Name of Owner	
Phone Number	**Email Address**

PART B DETAILED INFORMATION		
TYPE OF FENCE (check one):	**DETAILS OF FENCE**	**ADDITIONAL INFORMATION**
☐ Wood ☐ Vinyl ☐ Chain Link ☐ Metal ☐ Privacy ☐ Other_____	**Height:** Feet: _____ Inches: _____ **Overall height from grade:** Feet:_____ Inches: _____	Subject Property is a (check one) ☐ CORNER lot ☐ INTERIOR lot Will fence be located at a corner lot of any streets or alleys? ☐ YES ☐ NO

PART C CHECK LIST AND CONTRACTOR INFORMATION		
Contractor		
Address		
City	**State**	**Zip Code**
Phone Number	**Email Address**	

Please include a SITE PLAN detailing the following items with your completed application:

☐ North Arrow ☐ Lot Size with Dimensions ☐ Street Names ☐ All Structures on Property
☐ Right-of-Ways ☐ Location of Fence and Setback Distances from all Property Boundary Lines

Owner's Certificate: *I certify that the information contained in this application and on any accompanying documents is true and correct.*

Applicant's Signature: X_____ Date:_____

FOR OFFICE USE ONLY		
Property Zoning	**Permit Fee**	**Permit Number**
Approval by: **Zoning Administrator**		**Approval Date**