The City of Canal Winchester
Development Department
45 E. Waterloo Street
Canal Winchester, Ohio 43110
Phone (614) 837-7501 Fax (614) 837-0145

FENCE PERMIT APPLICATION

PROPERTY OWNER

Name _____

Address _____

Phone _____ Email _____

APPLICANT

Name _____

Address _____

Phone _____ Email _____

Address of Subject Property _____

Fence Height and Material _____

_____

Estimated Cost $_____

Attach a current plot map showing the location of the proposed fence along with an elevation of the proposed fence indicating the fence height. Additional information may be required to determine compliance with the Zoning Code by the Planning and Zoning Administrator.

I certify that the information provided with this application is correct and accurate to the best of my ability.

Property Owner's or Authorized Agent's Signature **Date**

DO NOT WRITE BELOW THIS LINE

Date Received: ____ / ____ / _____ Fee: $_____

Date of Action: ____ / ____ / _____ Paid: ☐

Expiration Date: ____ / ____ / _____

Tracking Number: PF - _____

Historic District: ___ Yes ___ No

Preservation District: ___ Yes ___ No

Application Approved: ___ No
___ Yes
___ Yes, with conditions