

TOWN OF PALISADE COMMUNITY DEVELOPMENT DEPARTMENT PLANNING CLEARANCE: FENCES/WALLS/SIMILAR STRUCTURES

PERMIT ADDRESS/PARCEL NO	DATE:	
OWNER INFORMATION:	APPLICANT/ CONTRACTOR INFORMATION:	
☐ Check box if owner/applicant are the same		
Name:	Name:	
Address:	Address:	
Phone Number:	Phone Number:	
Email:	nail:	
APPLICATION:	FEES:*	
☐ Fence	\$10.00	
☐ Wall/Similar Structure	\$10.00	
*Listed fees do not include any additional charges for legal,	/engineering review, mailings, or recording costs.	
ADDITIONAL FEES:		
Business License (<i>if applicable, \$10/day, \$50/calendar year</i>	·)	
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TOTAL FEES DUE:		
REQUIRED DOCUMENTI	ON AND INFORMATION:	
Required Documentation:	Required Information:	
□ 8.5"x 11" Scaled Site Plan & Aerial Photo (<i>must</i>	□ Property zoning:	
include scaled drawing of setbacks, property	☐ Height of proposed structure(s):	
boundary, any property restrictions, easements,	Description of material and configuration.	
or rights-of-way, location of proposed structure, and height of proposed structures)	☐ Description of material and configuration:	
☐ Property (Improvement) Survey		
☐ Statement of Non-Objection (<i>if applicable</i>)		
☐ Plan View, Imagery of proposed fencing		

ACKNOWLEDGMENT

I hereby acknowledge that I am responsible for correctly identifying all property lines, easements, and rights-of-way, and ensure the fence is located within property boundaries. Covenants, conditions, restrictions, easements, and/or rights-of-way may restrict or prohibit the placement of fence(s). I acknowledge I am responsible for compliance with covenants, conditions, and restrictions which may apply. Fences and similar structures built in easements may be subject to removal at the property owner's sole and absolute expense. Any modification of design and/or material once approved in this fence permit must be reapproved, in writing, by the Community Development Director.

I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations, or restrictions which apply to the project. I understand that failure to comply may result in legal action, which may include, but is not limited to, non-use of the building(s). I acknowledge the accuracy of any plot plan provided and further acknowledge that the burden for the accurate placement of any structure is the applicant(s) sole responsibility.

Applicant Signature:	Date:	
Owner Signature:	Date:	
TOP Staff Approval Signature:	Date:	
<u>Useful information for your project can be found within the Town of Palisade Land Development Code. The online version is available at:</u>		
<u>is available at:</u> http://townofpalisade.org/departments/community-development/land-development-code		
STAFF NOTES:		