

FENCE PERMIT APPLICATION

Town of Elon Planning Department 104 S. Williamson Avenue Elon, NC 27244 336-584-2859 (Site Sketch Required)

\$60.00		
Fee		
Date Received		
Application Number		

APPLICANT INFORMATION			
APPLICANT NAME:	TELEPHONE:		
MAILING ADDRESS:	CITY:	STATE:_ ZIP:	
EMAIL:			
PROPERTY INFORMATION			
ADDRESS:	CITY:	STATE: ZIP:	
TAX MAP & PARCEL:	TOTAL ACREAGE:		
PROPERTY OWNER:	TELEPHONE:		
MAILING ADDRESS:			
PLEASE NOTE: A RECORDED SURVE PROPERTY INFORMATION CANNOT BE		ER TO PURCHASE MAY BE REQUIRED IF THE	
Brick or Stone			
Fence Height: (Resi	dential fences may be no higher than 4' ir	n front yards and 6' in side & rear yards)	
SIGNATURES AND ACKNOWLEDG	EMENT		
	rue and correct to the best of my knowle	am making application with the full authority of the dge. I also certify that I have or will comply with all les, Ordinances or Regulations.	
Signature of Applicant		Date	
Signature of Property Owner	·····	Date	
TO BE COMPLETED BY ZONING O	FFICIAL		
	J Planning District/Overlay:		
Town Zoning Official Signature		 Date	