



**APPLICATION FOR ZONING CERTIFICATE (FENCE)**

**WEATHERSFIELD TOWNSHIP**

*"Come Home to Weathersfield"*

1451 Prospect Street

Mineral Ridge, Ohio 44440

Phone: (330) 652-6326 Fax: (330) 544-7491

[www.weathersfieldtp.com](http://www.weathersfieldtp.com)

Permit/Zoning Certificate No. \_\_\_\_\_ Date \_\_\_\_\_ Est. Value \$ \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_

Property Address \_\_\_\_\_ Parcel # \_\_\_\_\_ Zoning District \_\_\_\_\_

Property Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Applicant \_\_\_\_\_ Name of Business \_\_\_\_\_

*Contact information for Applicant, if different than Property Owner:*

*Mailing Address* \_\_\_\_\_

*Email Address* \_\_\_\_\_ *Phone Number* \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Total Length: \_\_\_\_\_ feet Height: \_\_\_\_\_ feet (at highest point)

Type of Fence (material): \_\_\_\_\_ Check if temporary fence \_\_\_\_\_

Size of Lot:  
\_\_\_\_\_ feet wide \_\_\_\_\_ feet deep Area: \_\_\_\_\_ sq. ft.

**Location on Property, Height and Total Length of Proposed Fence:**

FRONT	Height _____	Length _____
SIDE(S)	Height _____	Length _____
SIDE(S)	Height _____	Length _____
REAR	Height _____	Length _____

LOCATION: \_\_\_\_\_ ON PROPERTY \_\_\_\_\_ OFF PROPERTY \_\_\_\_\_ Inches  
LINE LINE Feet

\*If on property line, attach survey or agreement

