



Village of Minerva Park

PLANNING & ZONING
 2829 MINERVA LAKE RD
 COLUMBUS OH 43231
 PHONE: 614-882-5743
 FAX: 614-882-0701

PERMIT NO: _____
MP NO. _____
RECD BY _____ DATE: _____

FENCE PERMIT APPLICATION

PLEASE NOTE: This application is not to be considered complete until all documents are received and approved by the Planning & Zoning Administration

Project/Property Address or Location:		Project Name/Business Name (if applicable)		
Parcel ID No.(s):		Current Zoning:		Total Acreage:
Type of fence to be erected				
New Fence <input type="checkbox"/>	Replacement <input type="checkbox"/>	Additional <input type="checkbox"/>	Please describe any existing fence present on your property, or neighbor property (include, material, height, and color):	
Picket <input type="checkbox"/>	Privacy <input type="checkbox"/>	Chain Link <input type="checkbox"/>	Split Rail <input type="checkbox"/>	Other (please describe) <input type="checkbox"/> _____
Material Type				
Wood <input type="checkbox"/>	Vinyl <input type="checkbox"/>	Metal <input type="checkbox"/>	Composite <input type="checkbox"/>	Other (please describe), include color <input type="checkbox"/> _____
Posts and Caps				
Post Caps <input type="checkbox"/> Yes <input type="checkbox"/> No		Lighting <input type="checkbox"/> Yes <input type="checkbox"/> No		Other (please describe) <input type="checkbox"/> _____
Additional Information (if applicable):				
APPLICANT Name (primary contact) – do not use a business name			Applicant Address:	
Applicant E-mail:			Applicant Phone No.:	
BUSINESS Name:				
FRENCE ERECTOR Name			Village Registration No.	
Fence Erector Email:			Fence Erector Phone No.	
ADDITIONAL CONTACTS (please list all applicable contacts)				
Name(s):			Contact Information (phone no./email):	
Contractor				
Surveyor				
Architect				
PROPERTY OWNER Name:			Property Owner Contact Information (phone no./email):	

APPLICANT SIGNATURE BELOW CONFIRMS THE SUBMISSION REQUIREMENTS HAVE BEEN COMPLETED (see page 2 & 3)

I certify that the information on this application is complete and accurate to the best of my knowledge, and that the project as described, if approved, will be in accordance with the conditions and terms of that approval.

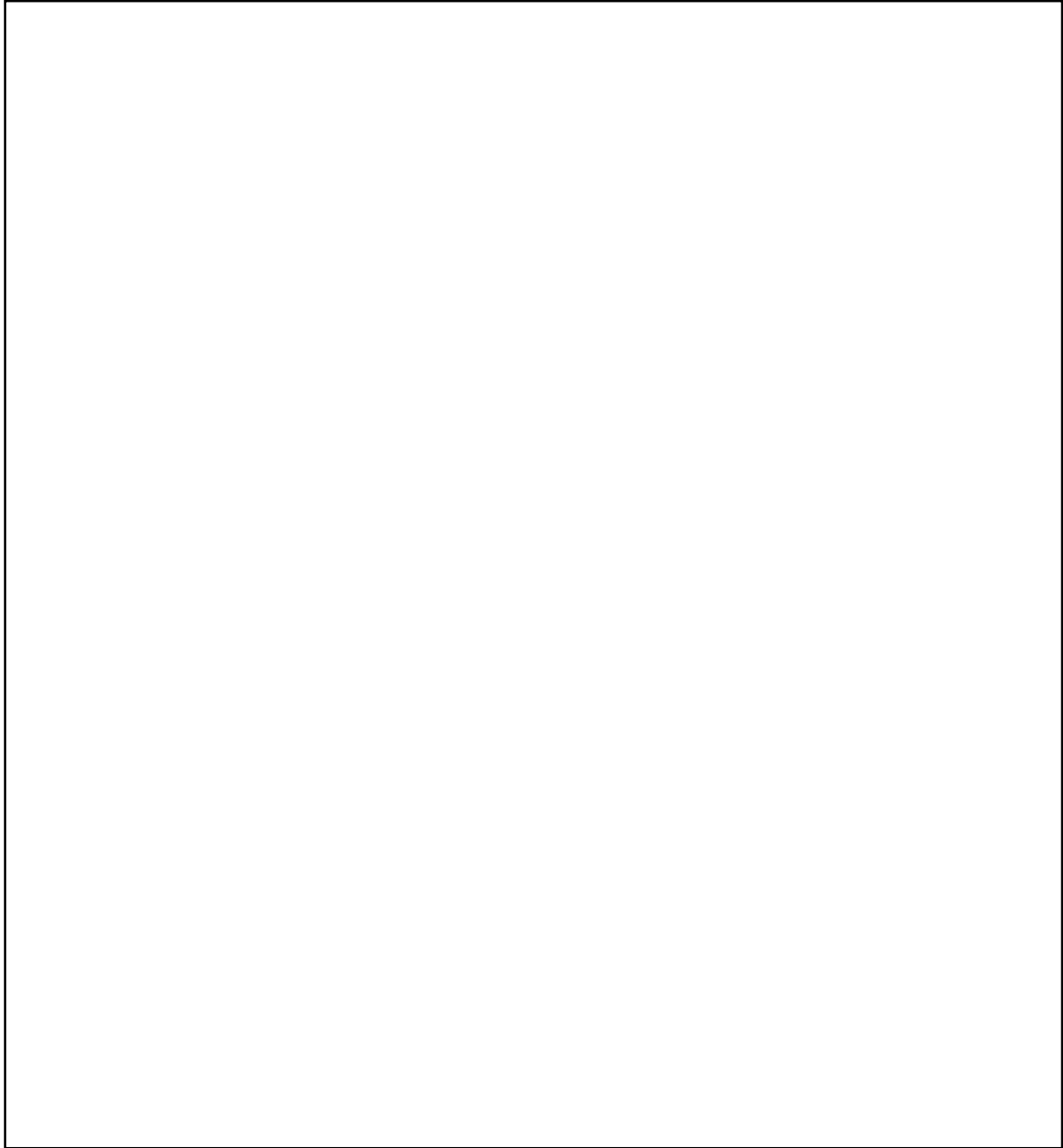
Applicant Signature: _____ Date: _____

Location: _____

Permit # _____

SITE PLAN - REQUIRED

Please show property lines, existing fence, proposed fence, all dimensions of existing structures, and how far structures are from one another, and the dimensions the fence is from all the property lines and structures. *(you may use graph paper, or any other site plan showing this required information)*



___ NOT TO SCALE ___ TO SCALE

APPEAL

FEE:
DATE:
CHECK#:

APPEAL

P&Z Review Required
P&Z Review Date:
APPROVED DENIED

Variance Applied
Hearing Date:
APPROVED DENIED

STAFF USE - INTAKE	TO BE COMPLETED/SUBMITTED BY THE APPLICANT:	APPLICANT		STAFF USE	
		YES	N/A	YES	N/A
	1. Review Minerva Park Code ("Fences and Walls")				
	2. Drawings & Specifications to include: - Exact location of fence - Full dimensions - Location of gate(s) - Post locations - Type of material(s)				
	3. Property plot plan or certified survey showing streets, structures, building lines & easements				
	4. Corner lots only – certified survey plan				
	5. Fences over 6' – building permit				
	6. Application fee (below)				
	7. Application & all supporting documents submitted				
	8. Authorization Consent Form Completed				
	9. The Applicant must contact the Village of Minerva Park Planning & Zoning Office 614-882-5743 to schedule a HOLE INSPECTION after digging the post holes				
	10. The Applicant must contact the Village of Minerva Park Planning & Zoning Office 614-882-5743 to schedule a fence inspection upon completion of installation.				
Fee	Permit Type				
\$25	Residential				
\$200	Commercial				

APPLICATION ACCEPTANCE

This application has been reviewed and is considered complete and is hereby accepted by the Planning & Zoning Clerk of the Village of Minerva Park and will be forwarded to Code Enforcement for consideration.

Planning & Zoning Clerk

Date _____

AUTHORIZATION CONSENT FORM

If you are filling out more than one application for the same project & address, you may submit a copy of this form with additional applications

AUTHORIZATION FOR OWNER'S APPLICANT OR REPRESENTATIVE(S) *If the applicant is not the property owner, this section must be completed*

I, _____, the owner or authorized owner's representative of the subject property listed on this application, hereby authorize _____ to act as my applicant or representative(s) in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all terms and agreements made by the designated representative.

Property Owner Signature: _____ **Date:** _____

AUTHORIZATION TO VISIT PROPERTY

I, _____, the owner or authorized owner's representative of the subject property listed on this application, hereby authorize City representatives to visit, photograph and post notice (if applicable) on the property as described in this application.

Property Owner Signature: _____ **Date:** _____

AGREEMENT TO COMPLY AS APPROVED

I, _____, the applicant of the subject property listed on this application, hereby agree that the project will be completed as approved and any proposed changes to the approved plan shall be submitted for the review and approval to the Planning and Zoning Division staff

Applicant Signature: _____ **Date:** _____

FENCE PERMIT APPROVAL

In accordance with Chapter 1464 of the Codified Ordinances of the Village of Minerva Park, Ohio, I hereby certify that the project, as submitted on the application, was approved by Code Enforcement on _____. The applicant shall comply with any conditions approved and shall comply with all building, zoning and landscaping regulations of the Village of Minerva Park.

Site Location / Address _____ Permit No. _____

CONDITIONS _____

Code Enforcement Officer _____ Date _____

INSPECTIONS

HOLE INSPECTION

Date of Request Date of Inspection Code Enforcement Officer / Inspector

Results _____

FENCE INSPECTION

Date of Request Date of Inspection Code Enforcement Officer / Inspector

Results _____