

FENCE PERMIT APPLICATION

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

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: (please select one)			
Picket: <input type="checkbox"/>	Privacy: <input type="checkbox"/>	Chain Link: <input type="checkbox"/>	Split Rail: <input type="checkbox"/>
Other (please describe): <input type="checkbox"/> _____			
Is the property located in a subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, subdivision name:	Is the property a corner lot: Yes <input type="checkbox"/> No <input type="checkbox"/>	Is there a pool on the property: Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there deed restrictions: (if yes, please attach the deed & an explanation of the restrictions) Yes <input type="checkbox"/> No <input type="checkbox"/>	Material(s):	Height of fence:	
APPLICANT Name (primary contact) -do <u>not</u> use a business name:		Applicant Address:	
Applicant E-mail:		Applicant Phone No.:	
BUSINESS Name (if applicable):			
FENCE ERECTOR Name:		Gahanna Registration No.:	
Fence Erector E-Mail:		Fence Erector Phone No.:	
PROPERTY OWNER Name: (if different from Applicant)		Property Owner Contact Information (phone no./email):	

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

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 completed in accordance with the conditions and terms of that approval.

Applicant Signature: _____ Date: _____

THIS FORM IS AVAILABLE TO BE SUBMITTED ONLINE: www.gahanna.gov

INTERNAL USE

Zoning File No. _____

RECEIVED: _____
DATE: _____

PAID: _____
DATE: _____
CHECK#: _____

FENCE PERMIT APPLICATION – SUBMISSION REQUIREMENTS

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

STAFF USE - INTAKE	TO BE COMPLETED/SUBMITTED BY THE APPLICANT:	APPLICANT		STAFF USE	
		YES	N/A	YES	N/A
	1. Review Gahanna Code Section 1171 (visit www.municode.com)				
	2. Drawings & specifications to include: - Exact location of the fence - Location of gate(s) - Kind of material(s) - Full dimensions				
	3. Property plot plan or certified survey showing streets, structures, building lines & easements. <i>Note:</i> • Plot plans can be found at www.franklincountyauditor.com/your-property . • Certified surveys can be found in the homeowners closing documents				
	4. Corner lots only – certified survey plan				
	5. Fences over 6' – building permit				
	6. Application fee (in accordance with the Building & Zoning Fee Schedule)				
	7. Application & all supporting documents submitted in digital format				
	8. Application & all supporting documents submitted in hardcopy format				
	9. Authorization Consent Form Complete & Notarized (see page 3)				
	10. The applicant must contact the City of Gahanna, Zoning Division (614.342.4025) to schedule a fence inspection upon completion of installation				

THIS FORM IS AVAILABLE TO BE SUBMITTED ONLINE: www.gahanna.gov

APPLICATION ACCEPTANCE

INTERNAL USE

This application has been reviewed and is considered complete and is hereby accepted by the Zoning Division of the City of Gahanna and shall be forwarded to Administration for consideration.

Planning & Zoning Administrator Signature: _____ Date: _____

AUTHORIZATION CONSENT FORM

(must sign in the presence of a notary)

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 & notarized.*

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 THE 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: _____

NOTARY

Subscribed and sworn to before me on this _____ day of _____, 20____.

State of _____ County of _____

Stamp or Seal

Notary Public Signature: _____

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 plans shall be submitted for review and approval to the Zoning Division staff.

Applicant Signature: _____ Date: _____

NOTARY

Subscribed and sworn to before me on this _____ day of _____, 20____.

State of _____ County of _____

Stamp or Seal

Notary Public Signature: _____



ZONING DIVISION
200 S. Hamilton Road
Gahanna, Ohio 43230
614-342-4025
zoning@gahanna.gov
www.gahanna.gov

NO FENCE MAY BE INSTALLED PRIOR TO OBTAINING APPROVAL FROM THE PLANNING & ZONING ADMINISTRATOR AND CITY ENGINEER

INTERNAL USE

FENCE PERMIT APPROVAL

In accordance with Section 1171 of the Codified Ordinances of the City of Gahanna, Ohio, I hereby certify that the project, as submitted on the application, was approved by Administration on _____. The applicant shall comply with any conditions approved and shall comply with all building, zoning and landscaping regulations of the City of Gahanna.

Site Location/Address: _____ Permit No. _____

CONDITIONS: _____

Planning & Zoning Administrator Signature: _____ Date: _____

ENGINEERING REVIEW

Checked for interference with City utilities including:

Water: _____

Sanitary Sewer: _____

Storm Sewer: _____

Drainage Swales: _____

Plats & Conditions: _____

City Engineer Signature: _____ Date: _____

The applicant must contact the City of Gahanna, Zoning Division (614.342.4025) to schedule a fence inspection upon completion of installation.

INSPECTION

Date requested: _____ Date performed: _____

Results: _____

Inspector Title/Signature: _____