



APPLICATION FOR FENCE PERMIT

CITY OF JORDAN
210 EAST FIRST STREET
JORDAN, MN 55352
952-492-2535

Site Information

Site Address: _____

Legal Description: _____

Applicant / Contractor Information

Name: _____ Phone: _____

Address: _____ Email: _____

Owner Information ([] Check if same as above)

Name: _____ Phone: _____

Address: _____ Email: _____

Fence Information

Fence Height: _____ feet front yard; _____ feet side yard; _____ feet rear yard. (Max 6' side and rear; 3.5' front yard)

Will the fence be located on a corner lot? ___ Yes ___ No (If yes, the fence shall not be located within 30' of the corner formed by the intersection of street or railroad right-of-way.)

Type of fence material proposed (City Code Section 154.313 (H) lists prohibited materials): _____

A site plan illustrating the proposed location of the fence on the property must be submitted with this application.

I certify that I have read the *City of Jordan Fence Permit Informational Handout* and that all information submitted is true and correct.

Applicant Signature: _____ Date: _____

Owners' Signature(s): _____ Date: _____

_____ Date: _____

I, an adjacent property owner, agree with the location of the property lines and/or the location proposed for this fence as identified by the applicant in the attached site plan.

Name: _____ Signature: _____

Date: _____ Address: _____

Contact Info: _____

Name: _____ Signature: _____

Date: _____ Address: _____

Contact Info: _____

Name: _____ Signature: _____

Date: _____ Address: _____

Contact Info: _____

Name: _____ Signature: _____

Date: _____ Address: _____

Contact Info: _____

FOR OFFICE USE ONLY

DATE SUBMITTED: _____ DATE COMPLETE: _____ IF INCOMPLETE, DATE LETTER SENT TO APPLICANT: _____

FEE PAID: _____ DATE FEE PAID: _____ FILE # _____

APPROVED _____ DENIED _____ BY _____

DATE OF ACTION: _____

DATE APPLICANT/PROPERTY OWNER NOTIFIED OF CITY STAFF ACTION: _____

DATE FENCE PERMIT ADDED TO PROPERTY ADDRESS FILE.