



CITY OF OAK CREEK
 8040 S. 6th STREET • OAK CREEK, WI 53154
 PHONE (414) 766-7000

FENCE PERMIT APPLICATION

Permit No. _____
 Parcel No. _____

Owner's Name	Owner's Email
Owner's Mailing Address, City, State & Zip (if different from Project Address)	
Phone ()	
Contractor's Business Name	Contractor's Email
Contractor's Business Mailing Address, City, State & Zip	
Phone ()	

PROJECT ADDRESS: _____
 Fax () _____

ESTIMATED PROJECT COST \$ _____

SETBACKS: Distance from lot lines to the fence. (Standing with your back against the house, looking into the backyard.)	Rear Lot Line Ft.	Left Lot Line Ft.	Right Lot Line Ft.	Front Lot Line Ft.
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FENCE DESIGN (Required)

Height: _____ Ft

Material of fence (ie. Wood, vinyl, chain link etc): _____

Front yard only

Height: _____ Ft

Description of fence (ie. Split rail, wrought iron, etc): _____

The applicant agrees to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understands that issuance of the permit creates no legal liability, express or implied, on the Department or Municipality; and certifies that all of the above information is accurate.

PRINT CONTACT PERSON _____ Phone () _____

SIGNATURE OF APPLICANT _____ Date _____

24-HOUR NOTICE FOR ALL INSPECTIONS

OFFICE USE (Check list)	FEES	PAYMENT
<input type="checkbox"/> Fence Design: Fill in the blanks	Fence permit..... \$50.00	<input type="checkbox"/> None <input type="checkbox"/> Check <input type="checkbox"/> Cash
<input type="checkbox"/> Setbacks: filled in	Administrative fee..... \$5.00	
<input type="checkbox"/> Plat of Survey-Highlight to indicate where the fence is going on the property		
<input type="checkbox"/> Estimated cost filled in	TOTAL..... \$55.00	
	