

City of Glenns Ferry Fence Application



110 East 2nd Avenue ~ P. O. Box 910 ~ Glenns Ferry, ID 83623
208-366-7418 ~ fax 208-366-2238

Receipt#: _____ **Fee: \$** _____ **Approved by:** _____ **Date:** _____

1. Property Owner: _____ **Phone Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Contractor: _____ **Phone Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Contractor Registration Number: _____

2. Property/Permit Address _____

3. Material of Fence: _____ **Fence Height:** _____

4. Valuation od Project: _____

Draw a site plan below that show the following items:

*Streets, Alleys, Sidewalks & Driveways

*Location of structures and property lines

*Vision Triangle

*Location of existing fences & retaining walls

By signing this application, you are aware that it is your responsibility to verify the property line location. Your fence must be placed on your property.

Signature: _____ **Date:** _____

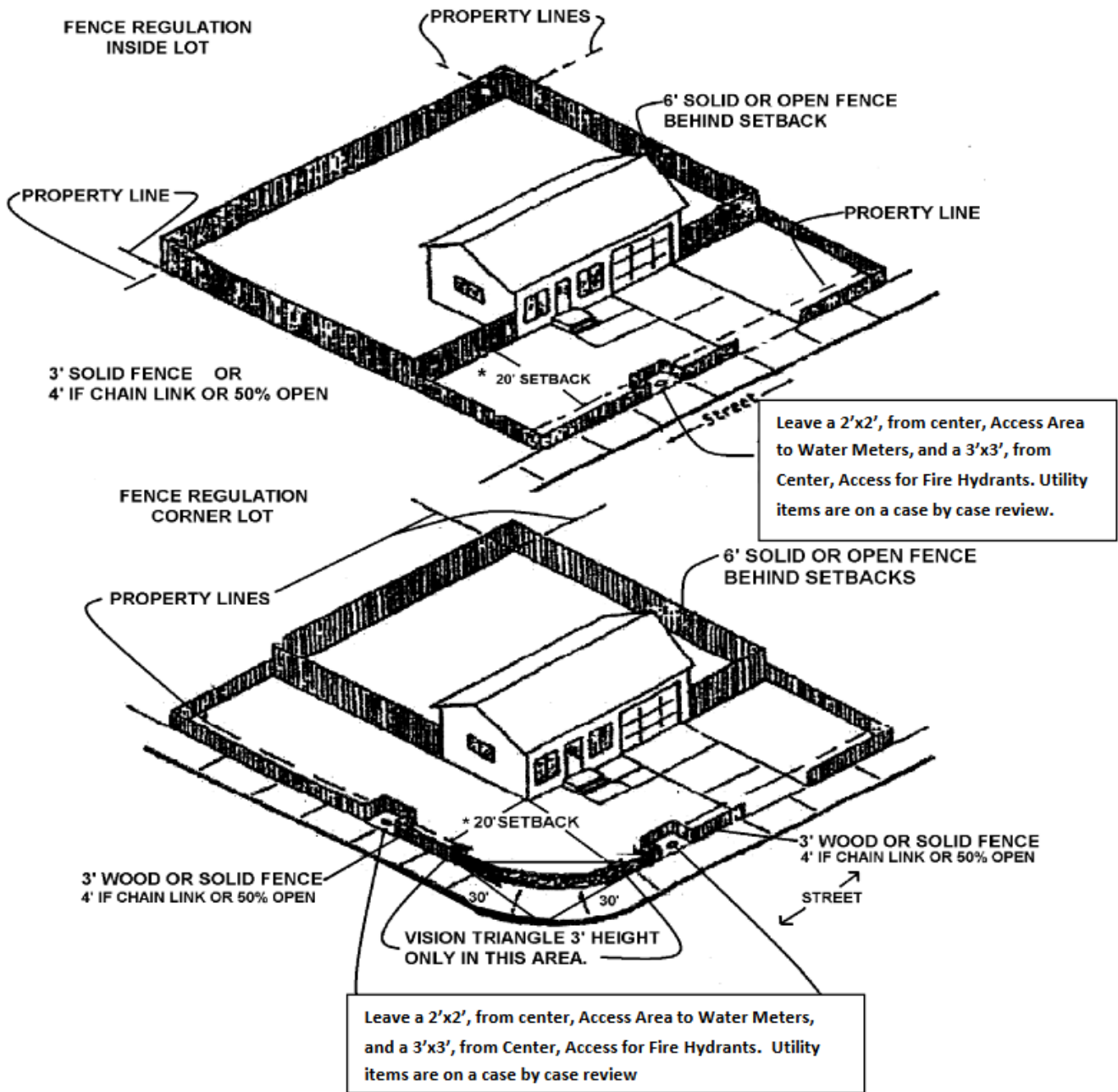
Please read carefully before signing

For further questions and Inspections contact: Vance Pruet, Building Inspector, by phone at (208) 599-4460

Staff Use

Approved By	Comments:

FENCE REGULATION



*SETBACKS MAY VARY WITH EACH ZONING DISTRICT

FENCES FROM STREET

R-1:	30 ft.
R-2:	25 ft.
R-3:	20 ft.
R-4:	20 ft.

DEPARTMENT USE ONLY

NOTES: