



**PERMIT APPLICATION SUBMITTAL
REQUIREMENTS
for
FENCE PERMIT**

*Please fill out this application and return it to the Center Township Office. This application **DOES NOT** give approval to continue with construction. You will be notified when your permit is ready or if your permit is denied. **You must also include a plot plan showing the proposed location of the fence.***

SITE OWNER INFORMATION

Site Address _____		City _____	Zip _____
If business, business name _____			
Owners Name _____		Owners Phone # _____	
Owners Address _____		City _____	State _____ Zip _____

FENCE INFORMATION

Fence is for; <input type="checkbox"/> Residence <input type="checkbox"/> Commercial / Industrial <input type="checkbox"/> Other _____			
Height of fence to front of principal building _____		Height of fence to side & rear of principal building _____	
Length of fence _____		Fence material; <input type="checkbox"/> wood <input type="checkbox"/> vinyl <input type="checkbox"/> metal <input type="checkbox"/> other _____	
		Estimated cost \$ _____	
Fence installation company; Name _____		Phone _____	
Address _____		City _____	State _____ Zip _____
Will the fence be used to keep animals <input type="checkbox"/> no <input type="checkbox"/> yes – quantity & type of animal _____			
Does any part of fence act as a barrier to a swimming pool <input type="checkbox"/> no <input type="checkbox"/> yes (see note below)			

Note: If fence encloses part of or all of a swimming pool, drawings must be included showing details for fence, fence gate, gate latching, etc. These drawings and the fence installation must comply with Appendix G of the International Residential Code, and local, state and federal rules and regulations. The International Residential Code is available for "in office" use at Center Township Municipal Building.

APPLICANT INFORMATION

I THE BELOW SIGNED APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINANT ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.			
(print)			
Name _____		Applicant's signature _____	
Address _____		Date of Application _____	
City _____	State _____	Zip _____	Phone # _____

>>> PERMIT EXPIRES 1 YEAR FROM ISSUE DATE <<<

BELOW TO BE COMPLETED BY TOWNSHIP

Application received by _____		on (date) _____		File # _____	
Permit # _____	Issued on (date) _____		Approved by (Code Official) _____		
Required fee \$ _____	Fee paid \$ _____	Check # _____	Received by _____		
----- FINAL APPROVAL -----					
ITEMS LISTED ABOVE WERE FOUND BY VISUAL INSPECTION TO BE IN COMPLIANCE WITH					
(code) _____		on (date) _____		by (Code Official) _____	

**CENTER TOWNSHIP, 419 Sunset Dr., Butler, PA 16001
Phone 724 282 7805 Fax 724 282 6550**