



## FENCE PERMIT APPLICATION

### Village of South Glens Falls

P.O. Box 1210 • 46 Saratoga Avenue • South Glens Falls, N.Y. 12803  
518-793-1455 • www.SGFNY.com • Fax 518-793-3063

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Permit Number: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Expires: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Property Address: \_\_\_\_\_

Name of Builder: \_\_\_\_\_

Size of Property: \_\_\_\_\_ By \_\_\_\_\_

#### SET BACKS:

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Front: \_\_\_\_\_

Back: \_\_\_\_\_

Sides: \_\_\_\_\_

Type of Fence: \_\_\_\_\_

Height: \_\_\_\_\_

Materials: \_\_\_\_\_

#### Zoning Information:

A plot plan must be prepared and submitted, drawn reasonably to scale and attached to this permit, showing all buildings, whether existing or proposed, and indicate all set back dimensions from property lines. Give street number or lot number and indicate whether interior or corner lot. Show location of water supply and septic disposal areas.

I have read the above and agree to abide by these and all requirements of the Village of South Glens Falls.

Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

Fee: \_\_\_\_\_ Building Inspector: \_\_\_\_\_