

BENSALEM TOWNSHIP

Building and Planning Department 2400 Byberry Road • Bensalem, PA 19020 Office 215-633-3644 • Fax 215-633-3753

Tax Parcel No.

FENCE PERMIT APPLICATION

PROPERTY OWNER	CONTRACTOR / APPLICANT
NAME:	NAME:
ADDRESS:	ADDRESS:
PHONE:	LICENSE #:
FAX:	FAX #:
	SITE INFORMATION
LOCATION:(Add	dress where fence is to be installed)
TAX PARCEL No.:	
HEIGHT of FENCE:	ESTIMATED COST: \$
FOOTING REQUIRED	FENCE MATERIAL: Wood
Notes:	Vinyl/PVC
	Metal/Chain Link
	Other
IMPORTANT: Prior to issuance of permit, a provide permanent markers at the corners of the subject property and is to be shown on the PLOT PLAN submitted with this application. Said surveyor shall provide certifications of any restrictions, easements or other covenants of record regarding the subject property. Applications submitted without meeting this requirement will be rejected. A SIGNED COPY OF THIS APPLICATION MUST BE SUBMITTED AT TIME OF OR PRIOR TO ISSUANCE OF PERMIT. Signature Owner Date	
OFFICE USE ONLY	
AF Zoning Officer	
AF Building Inspector	PPROVED YES NO
Notes:	