

**Application for Zoning Permit for Fence**

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

**VILLAGE OF LAGRANGE  
355 SOUTH CENTER STREET  
LAGRANGE, OHIO 44050**

**Zoning Clerk: Ron Harmon  
(440) 355-5555 Fax (440) 355-5250**

To the Village of LaGrange,

The undersigned hereby applies for a zoning certificate for the following use, to be issued on the basis of the representations contained herein, all of which the applicant certifies as true and correct:

Property Owner \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Applicant Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Location Address \_\_\_\_\_ Zoning District \_\_\_\_\_

Permanent Parcel # \_\_\_\_\_

Estimated Cost \_\_\_\_\_ Contractor \_\_\_\_\_

Please attach the following:

1. A description of the fence including height and type.
2. A scaled drawing of the location of the fence including setback from property lines and location in reference to buildings.

It is the responsibility of the property owner to determine the property line through location of property pins.

In addition to the information provided heron, the applicant for this zoning certificate shall provide all necessary drawings, notes, specifications, approvals, and other necessary information as required by the Village of LaGrange Zoning Code, and Subdivision Rules and Regulations.

Application fee of \$35.00 is due to the Village of LaGrange at the time of the application.

This permit shall become void if work is not started within one year and/or substantially completed within two and one-half years of the date of issuance.

You are to call for inspection after the fence is staked out and after it is completely installed.

It is agreed that the fence will meet all requirements of the appropriate and applicable sections of the Village of LaGrange Zoning Ordinance, as amended. If not, describe:

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Applicant \_\_\_\_\_

Date Received: \_\_\_\_\_ Zoning Clerk \_\_\_\_\_

Fee paid: \_\_\_\_\_ Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

Permit issued on \_\_\_\_\_

Comments: \_\_\_\_\_

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If application is rejected, reason for rejection: \_\_\_\_\_

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