



BENSALEM TOWNSHIP

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

Permit #	_____
Date	_____
Fee \$	_____
	S2

FENCE PERMIT APPLICATION

PROPERTY OWNER

CONTRACTOR / APPLICANT

NAME: _____

ADDRESS: _____

PHONE: _____

FAX: _____

NAME: _____

ADDRESS: _____

PHONE: _____

LICENSE #: _____

FAX #: _____

SITE INFORMATION

LOCATION: _____
(Address where fence is to be installed)

TAX PARCEL No.: _____ ZONING DISTRICT: _____

HEIGHT of FENCE: _____ ESTIMATED COST: \$ _____

FOOTING REQUIRED YES NO FENCE MATERIAL: Wood

Vinyl/PVC

Metal/Chain Link

Other _____

Notes: _____

IMPORTANT: Prior to issuance of permit, a **PENNSYLVANIA LICENSED SURVEYOR** shall be required to 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.

Signature

Owner Contractor

Date

OFFICE USE ONLY

Zoning Officer APPROVED YES NO _____
Date

Building Inspector APPROVED YES NO _____
Date

Notes: _____
