

OFFICE USE ONLY:	Date:	
Permit #:	_ Parcel #:	
Zoning District:	Waterfront: Yes	No

FENCE PERMIT APPLICATION

Zoning Department

1156 Alpine Drive Nekoosa, WI 54457

Email: zoning@romewi.gov

Phone: 715 325-8019 Fax: 715 325-8035

Application Fee(s):

\$125.00 IN PERSON APPLICATION FEE \$100.00 ELECTRONIC SUBMISSION APPLICATION FEE

www.romewi.gov		
Application Date:		
Property Address: Property Use: Residential	Commercial Industrial Agricultural	
FENCE AND LOT INFOR New Fence Replacement	_	
Fence Type:	☐ Open ☐ Solid ☐ Security ☐ Agriculture	
Location of Fence:	Yard Rear Yard Side Yard Is This a Corner Lot?	YesNo
Administrator. The application shall blocation of the buildings and structures	ct any perimeter fence, wall or hedge without having first obtained a permit from be accompanied by a drawing, site plan or plat map displaying property bounds son the property, the proposed location of the fence, wall or hedge and its distances on the property. The property owner is responsible for proper placement of	aries, the ance from the
OWNER INFORMATION	[:	
Name:		
	m property address):	
Phone No.:		
CONTRACTOR INFORM	IATION (if applicable):	
Mailing Address:		
Phone No.:	Email:	
Applicant's Statement / Wa		
of Rome and with the conditions of this that fence will not encroach onto public that I am responsible for removal and r determine if my project is subject to re-	ation is accurate and I agree to comply with all applicable codes and ordinances is permit. I understand that I am responsible for locating fence on said property ic right-of-way, easements, into the road vision triangle, or onto neighboring preplacement of fencing located in easement areas. I understand that it is my resegulations of any other entity such as Adams County, the State of Wisconsin, or see of this permit creates no legal liability, express or implied, on the Town of Road-	y and certify coperties; and sponsibility to r a ome.
Applicant's Signature		
OFFICE USE ONLY:		
Paid: \$	Approved by: Date:	
(check # or cash)	Denied by: Date:	
Date:	Comments / Conditions:	
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