

# Town of Orchard Park

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

BUILDING INSPECTOR'S OFFICE  
S 4295 South Buffalo Street  
Orchard Park, New York 14127-2609



Phone: 716-662-6430  
Fax: 716-662-6419  
www.orchardparkny.org

## Fence Permit Application

Address: \_\_\_\_\_ Zone: \_\_\_\_\_

Value of Project: \_\_\_\_\_ S.B.L # \_\_\_\_\_ Lot No \_\_\_\_\_

Contractor: \_\_\_\_\_

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

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fence

### Requirements Prior to Issuance of Permit:

1. Survey of Property indication Location of Proposed Fence
2. Proof of Valid Insurance (Disability and Worker Compensation or NYS Exemption)

Feet From Lot Lines: Front: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_ Corner Lot: \_\_\_\_\_

Fence Location:  Front Yard  Side Yard  Rear Yard

Fence Use:  Decorative  Privacy  Retaining Wall  Pool

Fence Style:  Solid  Picket  Ornamental  Chain Link

Fence Material:  Wood  Vinyl  Brick/Stone  Wrought Iron  Steel

Linear Feet: \_\_\_\_\_ Fence Height: \_\_\_\_\_ Date Work Will Begin: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Applicant hereby affirms that all work shall be performed in accordance with applicable codes, regulations, and manufacturer's installation instructions and authorizes the Code Enforcement Officer(s) to enter the premises listed herein in any reasonable time to perform all required inspections of the permitted work.

Property Owner: \_\_\_\_\_  
Print and Sign

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Letter of Authorization Submitted

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Official Use Only:

Items supplied:  2 Sets of Plans  Survey  Disability \_\_\_\_\_  
 Workers Compensation \_\_\_\_\_  Insurance Waiver \_\_\_\_\_

Building Inspector: \_\_\_\_\_ Issued: \_\_\_\_\_

Permit #: \_\_\_\_\_ Permit Fee \_\_\_\_\_ + Additional Fee \_\_\_\_\_ = \_\_\_\_\_

Town Clerk Stamp