City of Milwaukee

Mail (with \$20 fee) to:

Milwaukee Development Center PO Box 324

Milwarkee, WI 53201-0324

Phone: (414) 286-8211

FENCE PERMIT APPLICATION for Residential Properties

405057 861 10 3000 1233 P1 37-0963888774 20.00

Property Address Just V 15				Cashier Validation	V - 1 4 155 4000 1 7 1 100
Owner Dr. Jones	4,000	Address Address	Mille Ti	200	Phone 4/5 T
Contractor LDR (1117)		Address			Phone
Please tell us about the property where the fence is being built.			if you would like to	draw a sketch d	of your project, use this
How many dwelling units are on the property? (single, duplex, etc.)			space. (A sketch is not required.) Please put "North" arrow and/or note "front," "alley," etc. on diagram.		
How many main be	uildings (excludir e on the property	ng 🤳	1 /	- 6	La transfer and the second
Is the property on	a corner or alley				in the state of th
Please explain the fence p Front Yar	Fence Heigh				A second
Side Yar	d		1.3	•	
Rear Yar				and the second of the second	and the second company of the second
Other locatio					
Any additional information about your fence project:			Varietana mereka		***
CART OF APPRESIDENT LOCKS			Your fence must meet these code requirements: * All structural elements to face inwards (toward your property) not towards the street or your neighbor.		
Frances Pul Has Demon			*The entire fence must be built inside your property lines. * Sections of your fence that are built on a corner or on an alley can be no more than 3 feet tall.		
		Access of the Control	More information about Permits," published by	t requirements is the Milwaukee [contained in "Fence Development Center, at at www.mkedcd.org/build
What is the total COST of the fence? (Materials and Labor)			The fee for a fence permit is \$20. Make check payable to "City of Milwaukee."		
attest that the above information Milwaukee and State of Wisconsi esult in penalties prescribed in th	n codes applicable to le Milwaukee Code d APPLICANT'S	o the occupancy and work of Ordinances SIGNATURE:	stated above Lunderstan	ed on if. I agree to not that any falsifica	comply with all City of atlon or misinformation may
	CONTROL OF THE	SEMANDA AND LEAD OF	Mary Medical Constitution		
For staff use only:					
Zoning District:	Historic Status:	Renewal District:	CONDITIONS OF AP	PROVAL:	P LOT MAC
Variance Approval: BOZA -or- Standards	Use Code:	Census Tract:	100000		-46 4/16J
BOZA -or- Standards lect: ate:	581O		STAFF SIGNATURE:	<i>S</i> 5/8	1/00
					