



*MAYOR AND CITY COUNCIL
17 EAST BALTIMORE STREET
TANEYTOWN, MARYLAND 21787
PHONE: (410) 751-1100 FAX: (410) 751-1608
WEBSITE: www.taneytown.org*

FENCE PERMIT APPLICATION AND CERTIFICATE

CERTIFICATE NUMBER: _____

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

PROPERTY OWNER'S PHONE NUMBER: _____

ADDRESS OF PROPERTY: _____

ZONING OF PROPERTY: _____

CONTRACTOR'S NAME: _____

CONTRACTOR'S ADDRESS: _____

CONTRACTOR'S PHONE NUMBER: _____

TYPE OF FENCE: _____

FENCE HEIGHT: _____

The undersigned acknowledges receipt of the requirements for Ordinance 205-30 Fences and Walls and certifies that the above information is correct.

APPLICANT SIGNATURE _____ DATE _____

FEE \$10.00 Received: _____

FOR CITY OFFICE USE ONLY

APPROVED _____ DATE _____
City Manager/Zoning Administrator

DISAPPROVED _____ DATE _____
City Manager/Zoning Administrator