



730 Washington Ave Rm.
304 Racine, WI 53403
Phone: (262) 636-9164
Fax: (262) 636-9329

City of Racine Building Division

FENCE PERMIT APPLICATION

PERMIT NUMBER _____

Project Address

Owner

Contractor

Address

Address

City/ZIP

City/ZIP

Email

Email

Phone

Phone

Description of Work

Project Cost

Location of Fence (Select All that Apply)

Front Yard Side Yard Rear Yard Other _____

Height of Fence (Select All that Apply)

Front Yard _____ Side Yard _____ Rear Yard _____ Other _____

Does the Fence have a Gate? Yes No

NOTE: If yes, it must open into your property.

State what Type of Material is Proposed for the Fence _____

Note: **ANY WORK DONE WITHOUT PERMITS MAY RESULT IN DOUBLE PERMIT FEES.**

Per Sec. 18-93 all building permits are valid for a period of eighteen (18) months from date of issuance.

The undersigned hereby makes application for this permit to do the work herein described and as shown on the attached Construction Plans, Site Survey, and hereby agree that all work will be done in accordance with all applicable codes and ordinances of the State of Wisconsin, and the City of Racine.

Signature

Print Name

Date

PERMIT FEE \$100

PERMIT APPLICATION PROCEDURES

Applications must include:

- Completed Fence Permit Application
- Site Plan of Proposed Fence Location on the Lot, with Dimensions
- Permit Payment