



Fence Permit Application
 Neighborhood Services Department – Suite 211
 301 Washington Ave., Bay City, MI 48708

Have questions? Require Assistance?

Fee \$20.00

Contact the Zoning Administrator
 (989)894-8156 or smckillop@baycitymi.org

Property Address:		Zoning District:	
Property Owner:		Owner Phone:	
Address:	City:	State:	Zip:
Installer Name:		Phone:	
Address:	City:	State:	Zip:

<input type="checkbox"/> New OR <input type="checkbox"/> Replacement	Type of Fence: <input type="checkbox"/> Wood Height _____ <input type="checkbox"/> Vinyl Height _____ <input type="checkbox"/> Chain Link Height _____ Notes: Chain link fences <u>are not permitted</u> in front yards. The finished side of fences must face adjoining properties.
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Incomplete Applications Will Not Be Approved
Site Plan Required

Please provide a drawing illustrating the location of the fence on your lot in relationship to lot lines and adjoining street(s). Please indicate height of fence in front yard, side-street side yard, and street intersection and driveway unobstructed sight zones.

I affirm that the above information is complete and accurate and that I shall install the/my fence in accordance with the provisions of chapter 122, article XIX of the City of Bay City Code of Ordinances.

Applicant Signature: _____ **Date:** _____

City Use Only

Application approved? Yes: _____ No: _____ By: _____ Date: _____

Zoning Variance Required? Yes: _____ No: _____ Variance Granted? Yes: _____ No: _____ Case # _____