



**Brunswick Hills Township**  
1918 Pearl Road, Brunswick, Ohio 44212-3202  
Medina County

**APPLICATION FOR A FENCE PERMIT**

Zoning Certificate Number- \_\_\_\_\_ - \_\_\_\_\_

The undersigned hereby applies to Brunswick Hills Township, Medina County, Ohio for a fence zoning certificate. The Zoning Certificate to be issued on the basis of the information contained within this application and its attachments submitted to the office of the Zoning Inspector.

Owner's Name \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Location of Lot \_\_\_\_\_ Sub Lot # \_\_\_\_\_

Permanent Parcel Number (*required*): \_\_\_\_\_

Zoning District: \_\_\_\_\_ When is the fence being installed? \_\_\_\_\_

Existing Use of Bldg. and/or lot: \_\_\_\_\_

Total length of Proposed Fence: \_\_\_\_\_ Height \_\_\_\_\_ Feet

Cost of Fence \$ \_\_\_\_\_ Type of Fence: \_\_\_\_\_

Is the fence line staked out \_\_\_\_\_

**FINISHED SIDE MUST BE TO YOUR NEIGHBOR  
FENCE HEIGHT CAN NOT EXCEED 6' FROM GROUND**

**Please leave at least 6" of clearance from surrounding property lot lines for fence maintenance.**

It is understood and agreed that any error, misstatement, misrepresentation of fact or expression of fact, whether intended or not, that would cause a zoning certificate to be issued, that would otherwise be denied, shall constitute sufficient ground for revocation of zoning certificate at any time. The applicant hereby certifies that all information in this application and its attachments are true and correct. **Construction hours are Monday-Saturday 8 AM-6 PM. No Sunday or Holiday hours.**

**For any fence project other than backyard containment, refer to Zoning Resolution Sec. 303-6-H-1-5**

**The Zoning Permit resulting from this application shall become null and void six (6) months from the date of issue unless construction has started. At which time an extension permit shall be applied for from the Zoning Inspector.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ Date Received \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_ Check No. \_\_\_\_\_ Date of Action \_\_\_\_\_

Approved \_\_\_\_\_ Denied: \_\_\_\_\_ Reason: \_\_\_\_\_

Signature of Brunswick Hills Zoning Inspector: \_\_\_\_\_ Date \_\_\_\_\_