

The Village of WILLOWBROOK

7760 Quincy Street
Willowbrook, Illinois 60527-5594
Phone: (630) 323-8215 Fax: (630) 323-0787
<http://www.willowbrookil.org/>

SUPPLEMENTAL INFORMATION FOR A FENCE PERMIT

Date (mm/dd/yy) / /	<u>DATE RECEIVED STAMP</u>	FOR OFFICE USE ONLY	
Is the Applicant the Property Owner? <input type="checkbox"/> YES <input type="checkbox"/> NO		<u>Approved By:</u>	<u>Permit #:</u>
<input type="checkbox"/> Single Family Residential		<u>Approved Date:</u>	<u>Issued Date:</u>
<input type="checkbox"/> Multi-Family Residential			
<input type="checkbox"/> Commercial			
<input type="checkbox"/> Industrial			

PROPERTY OWNER INFORMATION

Street Address	Full Name (First / Last)
<u>Contact Information</u> Phone (Land Line) ()	E-Mail
Phone (Mobile) ()	Fax ()

FENCE CONTRACTOR INFORMATION

Business Name	Contact Person		
Street Address	City	State	Zip
Phone (Land Line)	E-Mail		
Phone (Mobile) ()	Fax ()		

SUBMITTAL OF THE FOLLOWING INFORMATION IS REQUIRED TO PROCEED:

<input type="checkbox"/> 1) COMPLETE A VILLAGE OF WILLOWBROOK BUILDING PERMIT APPLICATION
<input type="checkbox"/> 2) TWO (2) COPIES OF A CURRENT PLAT OF SURVEY OF THE PROPERTY FOR THE PROPOSED FENCE
<input type="checkbox"/> 3) THE EXACT LOCATION OF THE PROPOSED FENCE AND GATES MUST BE INDICATED ON EACH PLAT
<input type="checkbox"/> 4) A COPY OF THE FENCE CONTRACTORS 'PROPOSAL'
<input type="checkbox"/> 5) PROVIDE A MANUFACTURER'S PHOTOGRAPH / BROCHURE / LITERATURE DEPICTING THE PROPOSED DESIGN
<input type="checkbox"/> 6) FENCE DESCRIPTION AND LOCATION:

<p style="text-align: center;">6.1) "LOCATION" OF FENCE</p> <input type="checkbox"/> FRONT YARD <input type="checkbox"/> INTERIOR SIDE YARD <input type="checkbox"/> EXTERIOR SIDE YARD (CORNER LOT) <input type="checkbox"/> REAR YARD <input type="checkbox"/> OTHER: _____	<p style="text-align: center;">6.2) "STYLE" OF FENCE</p> <input type="checkbox"/> CYCLONE/GALVANIZED <input type="checkbox"/> SPLIT RAIL <input type="checkbox"/> STOCKADE/SOLID <input type="checkbox"/> ALUMINUM <input type="checkbox"/> OTHER: _____	<p style="text-align: center;">6.3) "HEIGHT" OF FENCE (FROM FINISHED GRADE TO HIGHEST POINT)</p> <input type="checkbox"/> THREE (3') FEET <input type="checkbox"/> FOUR (4') FEET <input type="checkbox"/> FIVE (5') FEET <input type="checkbox"/> OTHER: _____	<p style="text-align: center;">6.4) "NUMBER OF GATES" IN FENCE</p> <input type="checkbox"/> NONE (0) <input type="checkbox"/> ONE (1) <input type="checkbox"/> TWO (2) <input type="checkbox"/> THREE (3) <input type="checkbox"/> OTHER: _____
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CERTIFICATION

AS THE OWNER OF THE PROPERTY FOR WHICH THIS PERMIT IS ISSUED, AND AS THE APPLICANT OF THIS PERMIT, I AGREE TO CONFORM TO ALL APPLICABLE ORDINANCES, RULES & REGULATIONS OF THE VILLAGE OF WILLOWBROOK

SIGNATURE OF PROPERTY OWNER: (REQ'D TO PROCEED)		SIGNATURE OF APPLICANT:	
	<u>DATE:</u>		<u>DATE:</u>
PRINTED NAME:	/ /	PRINTED NAME:	/ /