



CITY OF GLEN COVE
Building Department

FENCE PERMIT APPLICATION

OFFICE USE ONLY

PERMIT NO. _____

Date: _____

All information must be complete to initiate the processing of the application

1) Property Information:

Street Address: _____

Section _____ Block _____ Lot _____ Zone _____

2) Property Owner / Applicant / Authorized Agent:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home: _____ Mobile: _____

3) Contractor: (If Applicable)

Name: _____

Street Address: _____ Nassau County License No: _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home: _____ Mobile: _____

4) Submission Requirements:

A site plan, survey, drawn to scale, that indicates the location of the proposed fence in relation to property lines, the edge of the existing street, right-of-way lines, easements, buildings, parking areas, and driveways. (Use of mortgage survey is permitted and encouraged.) *Please include a photo of proposed fencing style.*

5) Additional Information:

FENCE MATERIAL: _____ **WOOD** _____ **METAL** _____ **PLASTIC**

- No fence may be constructed over 6 feet in height.
- **ALL** Fencing to be installed within the property boundaries.
- No fence may alter or impede the natural flow of water in any stream, creek, drainage swale, ditch, or drainage easement.
- The finished or "good" side of the fence must face the abutting property. The exposed framing of each section of fence must face the interior yard or property.
- The fence must not block access from a door or window.



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6) Certification and Signature:

I hereby certify that I have read and examined this application and that all statements, drawings, and specifications are true and correct. Furthermore, I certify that the proposed fence will comply with all of the requirements of the City of Glen Cove Ordinance, except as specifically noted herein, and will not encroach onto the land of adjoining neighbors or into any public right-of-way. If the fence is built across any easement, I understand and agree that it is my responsibility as owner of the property to remove and replace the fence at my cost should access to or construction within the easement necessitate the removal or replacement of the fence.

RELEASE / HOLD HARMLESS AGREEMENT

A permit issued pursuant to this application signifies only that the proposed project complies with the City ordinances and regulations, and the applicant is advised that the City has not performed a risk assessment with respect to the project. In consideration of the issuance of the permit, the applicant, on behalf of him/herself and heirs and assigns, shall release, indemnify, and defend and hold the City of Glen Cove harmless from any and all damages and/or claims for damages, including reasonable attorneys fees, arising from or in any way related to the issuing of a permit pursuant to this application.

The applicant further understands that the applicant's contractor must procure and maintain for the duration of the project, insurance against claims or injuries to persons or damages to property which may arise from or in connection with the project authorized by the permit. The City of Glen Cove is not responsible to verify whether contractors not included on this permit application are licensed, insured and bonded.

I HEREBY CERTIFY that this application, as well as the site plan and survey, is a true representation of all facts concerning the proposed fence installation activity. This application is made with my approval as Owner or Authorized Agent for the Owner, as evidenced by my signature below. FOR THE DURATION OF THE PERMIT, IF ISSUED, I ASSUME LEGAL RESPONSIBILITY FOR ANY AND ALL VIOLATIONS OF THE CITY OF GLEN COVE CODES AND ORDINANCES AS WELL AS PERMIT CONDITIONS ON THE PROPERTY DESCRIBED ABOVE.

I have read and complied with the submission requirements and affirm that all statements contained herein are true and accurate.

Applicant Signature

Printed Name

Date

Property Owner/ Agent Signature

Printed Name

Date

**PERMIT EXPIRES 6 MONTHS AFTER APPROVAL DATE STAMPED
PLEASE CALL THE BUILDING DEPARTMENT FOR FINAL INSPECTION ONCE COMPLETE**