



Building & Fire Prevention Division
RESIDENTIAL FENCE PERMIT APPLICATION

Application No: _____

Documented Construction Value: \$ _____

Job Address: _____ Historic District: Yes No

Parcel ID: _____

Plan Review Contact Person: _____ Title: _____

Phone: _____ Fax: _____ Email: _____

Residential Fence Information

Type of Fence: Wood Metal PVC/Vinyl Iron Other _____

Fence Height: _____ Feet # Gates: _____ Total Linear Feet: _____

Additional Information: _____

****Fences with a height of over 6 feet will require signed & sealed structural engineering****

Property Owner Information

Name _____ Phone: _____

Street: _____ Resident of property? : _____

City, State Zip: _____

Fence Contractor Information

Name _____ Phone: _____

Street: _____ Fax: _____

City, State Zip: _____

Please Note: The Building Department does not perform site inspections on Residential Fence permits. A signed and notarized Fence Affidavit is required to be submitted along with this permit application. Please see the attached Fence Permit Submittal Guidelines.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.



***Building & Fire Prevention Division
FENCE PERMIT SUBMITTAL CHECKLIST
(RESIDENTIAL ONLY)***

All permit application packages must be complete prior to acceptance. You must check each box to the left or indicate n/a on this submittal. A complete application package shall include the following:

Fences must be compliant with the City Land Development Regulations, Schedule F

- Fence Permit Application completed and signed. Application must include correct address and complete parcel I.D. number.
- Copy of a contract, signed by the contractor and the property owner, indicating the documented construction value (if the contractor is the applicant)
- Copy of the Business Tax Receipt (if the contractor is the applicant).
- Owner/Builder Statement/Affidavit
- Certificate of insurance indicating worker's compensation insurance coverage and naming the City of Sanford as certificate holder, or a copy of a worker's compensation exemption issued by the State of Florida (must be submitted with each application if contractor is the applicant).
- Indicate the number of linear feet, height, number of gates, and type of material on application.
- Two (2) copies of site plan indicating where the fence will be located on the property.
- Fence Affidavit, signed and notarized

Repairs

No Permit is required for Fence Repairs. A Fence Repair is qualified by one or more of the following:

- Replacing individual slats; no more than 10% of the entire fence
- Replacing a section; no more than 3 sections of the entire fence. A section is defined by the fencing material between 2 posts.
- Replacing a post; no more than 4 posts total. Posts must be placed in or directly around the removed post without encroaching on neighbor's property.
- Replacing a gate

****Please contact the Building Division if you have any questions on Fence Repairs****

These guidelines were compiled to assist the applicant in preparing a fence permit application and may not be complete. The applicant is required to meet all City of Sanford codes and requirements.



RESIDENTIAL FENCE AFFIDAVIT (6 FEET OR LESS IN HEIGHT)

PERMIT #: _____

ADDRESS: _____

I _____, HEREBY AFFIRM THAT ALL OF THE FOREGOING INFORMATION IS TRUE AND ACCURATE. THE FENCE WILL BE INSTALLED IN THE APPROVED LOCATION AS SHOWN ON THE APPROVED SITE PLAN. THE FENCE WILL BE NO HIGHER THAN 6 FEET, MEASURED FROM GRADE. THE FINISHED SIDE OF THE FENCE IS REQUIRED TO FACE OUT. IT IS THE HOMEOWNER'S RESPONSIBILITY TO VERIFY THE FENCE IS PLACED WITHIN THE PROPERTY LINES AND ANY DISPUTES BETWEEN ADJACENT HOMEOWNERS WILL BE A CIVIL MATTER. I UNDERSTAND THAT FAILURE TO PROPERLY FOLLOW THESE GUIDELINES AND ADHERE TO ALL CITY CODES (SANFORD LAND DEVELOPMENT REGULATIONS, SCHEDULE F) COULD RESULT IN THE FENCE HAVING TO BE REPLACED, RELOCATED OR REMOVED AT THE OWNER'S EXPENSE.

FENCE CONTRACTOR

BY SIGNING THIS AFFIDAVIT, YOU ARE ACKNOWLEDGING YOU HAVE MADE THE HOMEOWNER AWARE OF THE FENCE AFFIDAVIT STIPULATIONS AS STATED ON THIS DOCUMENT.

COMPANY / CONTRACTOR: _____

CONTRACTOR SIGNATURE: _____

DATE: _____

HOMEOWNER (OWNER/BUILDER)

OWNER/BUILDER NAME: _____

OWNER / BUILDER SIGNATURE: _____

DATE: _____

****PLEASE NOTE****

THE BUILDING DEPARTMENT WILL NOT CONDUCT ANY INSPECTIONS ON RESIDENTIAL FENCES. THIS AFFIDAVIT MUST BE PROVIDED, SIGNED AND NOTARIZED, AT THE TIME OF PERMIT SUBMITTAL AND WILL SUFFICE AS THE FINAL INSPECTION APPROVAL FOR THE FENCE.

STATE OF FLORIDA COUNTY OF _____

Sworn to and Subscribed before me this _____ day of _____ 20__ by:

_____. Who is Personally Known to me or has Produced (type of identification) _____ as identification.

Signature of Notary Public
State of Florida

(SEAL)

Print/Type/Stamp Name
of Notary Public