MIKE COOPER
Mayor

CITY OF COVINGTON
BUILDING PERMITS OFFICE
317 N. Jefferson Avenue
Post Office Box 778
Covington, Louisiana 70434
phone 985.898.4725
fax 985.898.4723
email CovPermits@covla.com
website www.covla.com

FENCE PERMIT APPLICATION

FPA - | | | | | | | |

JOB ADDRESS & UNIT NUMBER

OCCUPANT

OCCUPANT PHONE

CONTRACTOR

PROPERTY OWNER

CONTRACTOR PHONE

PROPERTY OWNER PHONE

CONTRACTOR ADDRESS

PROPERTY OWNER ADDRESS

REGISTRATION NUMBER

FENCE SUBMITTAL INFO: Please include the following with the application: *(flip side or separate sheet)*

1. Detailed drawing that shows the existing and proposed fence height(s) and location(s), dimensions and locations of the property lines, street(s), building footprints(s), and the north arrow.
2. For non-residential properties, you must provide authorization from the property owner. You must also show the location of all gates.

PROPOSED FENCE & PROPERTY INFORMATION:

❑ Corner Lot ❑ Interior Lot Zone District: _____

❑ Residential ❑ Non-Residential or Mixed Use

	FRONT YARD	NON-PRIMARY FRONT	SIDE YARD	REAR YARD
Height				
Length				
In street side of				
Corner lots				
Gate for vehicles opens toward	❑ Yes ❑ No	❑ Yes ❑ No	❑ Yes ❑ No	❑ Yes ❑ No
Material				
Style (Privacy or 50% open)				

Fences shall be constructed so that the finished sides face the street or public space and the posts face the owner's property.

VALUATION OF FENCE: $_____ (Labor & Material Cost)

NOTE: The property owner is solely responsible for ascertaining true and correct locations of all property, right-of-way and easement lines. If encroachments on land other than that owned by the property owner are discovered after installation of improvements, the property owner may be required to remove the improvements at their own expense. This permit certifies you agree to comply with all applicable regulations as stated herein.

Print Name _____ Signatuare of Applicant _____ Date Submitted ____/____/____

Picture on reverse

For Staff to Complete

ZONING ❑ Approved ❑ Denied ❑ Not Required By: _____ Date: ____/____/____

VISIBILITY ❑ Approved ❑ Denied ❑ Not Required By: _____ Date: ____/____/____

CODE COMPLIANCE ❑ Approved ❑ Denied ❑ Not Required By: _____ Date: ____/____/____