

**CITY OF LATHROP, MO
FENCING PERMIT APPLICATION**

Date _____ Permit No. _____

Application No. _____ Date _____

Application is hereby made to: _____ Fee _____

Erect _____ Alter _____ Repair _____

Fence located at (general location or street location) _____

Legal Description of Property:

On Lot _____ Block _____ Addition _____

Other Description _____

On Land Zoned as District _____ Estimated Cost \$ _____

Additional Information or Remarks _____

Fencing Set Back Lines (Distance from Property Lines to Fence)

Front Yard _____ Side Yards (1) _____ (2) _____ Rear Yard _____

The applicant hereby agrees to abide by and comply with the conditions stated in the City Code and Zoning Ordinances of Lathrop, Mo. and furthermore understands that any variances from the provisions of the above mentioned codes and ordinances or from the conditions as stated herein shall constitute cause for retraction of this permit.

Owner _____ Applicant _____

Owner's Address _____ Applicant's Address _____

Approved _____ **Date** _____