



Office Use Only
Application No. _____

APPLICATION – FENCE, WALL, HEDGE & SHRUBBERY PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

APPLICANT INFORMATION

(LAST NAME)	(FIRST NAME)	(HOME PHONE)	(CELL PHONE)
(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP)
(EMAIL ADDRESS)		(WORK PHONE)	

PROJECT SITE/PROPERTY & OWNER INFORMATION

(LAST NAME)	(FIRST NAME)	(HOME PHONE)	(CELL PHONE)
(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP)
(EMAIL ADDRESS)		(WORK PHONE)	

(E911 or AVENUE/STREET ADDRESS)	(MAP ID)	<input type="checkbox"/> R1 <input type="checkbox"/> R2 <input type="checkbox"/> R3 <input type="checkbox"/> R4 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> I1 <input type="checkbox"/> I2 (ZONING DISTRICT/CODE – Check One)
<input type="checkbox"/> OLD TOWN <input type="checkbox"/> FOX POINTE <input type="checkbox"/> MAIN ST. <input type="checkbox"/> LEYLAND PK. <input type="checkbox"/> STRIMMEL'S <input type="checkbox"/> PARKERS RUN <input type="checkbox"/> STONINGTON <input type="checkbox"/> BUSINESS PARK (SECTION of TOWN – Check One) IDN		
(PIDN)	(LOT #)	(ACRES)

HEIGHT LIMITATIONS GUIDE

Placement Type	Setback	Height @	Height @	Height @	Height @
		Front Property Line	Side Property Line	Corner Side Property Line	Rear Property Line
Fence <i>(until front façade of building)</i>	10'	3'	6.5'	6.5'	6.5'
Wall	10'	3'	6.5'	6.5'	6.5'
Hedges*	N/A	N/A	N/A	N/A	N/A
Shrubbery*	N/A	N/A	N/A	N/A	N/A

**(if well maintained and without property encroachment)*

Applicant should review Town of Cheswold Land Use Ordinance, Article 8 – Dimensional and Density Standards, (Section 8-2C to ensure adherence to "Sight Triangle Requirements"

APPLICANT QUESTIONS

- | | | |
|--|--------------------------|--------------------------|
| | YES | NO |
| 1. Are there multiple property owners? <i>(If yes, please attach names and addresses)</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are all application documents attached? <i>(Permit application; plot plan; materials list; homeowners approvals; contractor's name; address; contact#and if required; any drawings or sketches)</i> | <input type="checkbox"/> | <input type="checkbox"/> |




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SITE PLAN

Scale: _____" = _____ft.





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APPLICANT REQUESTED PLACEMENT TYPE

1. What is requested placement type?: Fence Wall Hedge Shrubbery
2. What is requested placement type height?:
 At Front Property Line: _____ At Left Side Property Line: _____
 At Right Side Property Line: _____ At Corner Side Property Line: _____
(if applicable)

APPLICANT/OWNER CERTIFICATION

I certify that the information and exhibits submitted are true and correct to the best of my knowledge. Pursuant to said authority, I hereby permit Town of Cheswold Officials to enter upon my property for the purpose of inspection, and, if necessary, for posting a public notice on the property.

(APPLICANT SIGNATURE) (DATE)

(OWNER SIGNATURE - *REQUIRED if not the Applicant*) (DATE)

<i>For Office Use Only</i>			
Application No. _____	Certificate No. _____	Date Issued: _____	
Check Received: _____	Check No. _____	Check/Cash Amount: _____	
Amount Reimbursed: _____	Check No. _____	Date Issued: _____	
Approved by: _____		Land Use Administrator	Date Approved: _____

BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER CERTIFICATION

3. What is **approved** placement type height?:
 At Front Property Line: _____ At Left Side Property Line: _____
 At Right Side Property Line: _____ At Corner Side Property Line: _____
(if applicable)

4. Is property a corner property? YES NO
5. If YES, will placement type encroach on "Sight Triangle"? YES NO

6. If YES, what is required remedy?

7. If YES to Question 5, what is the completion date of the required remedy? _____



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BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER CERTIFICATION

- INSPECTION APPROVED AS SUBMITTED INSPECTION APPROVED PENDING CORRECTIONS – *See Below*
- INSPECTION DENIED** – *See Below for Reasons*

(BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER SIGNATURE)

(DATE)

(DATE RE-INSPECTED)

(DATE APPROVED)

(BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER SIGNATURE)

LAND USE ADMINISTRATOR DECISION

Does applicant meet the requirements for the installation of the placement type?

YES NO

If NO: why has the applicant failed?

Cite Land Use Ordinance requirements: Article # ___ Section # ___ Paragraph # ___ Various-See Below:

SIGNED: _____

DATE: _____

DATE APPLICANT NOTIFIED: _____ NOTIFIED BY: REGISTERED/CERTIFIED MAIL

IN-PERSON

Note: Land Use Administrator or designee should document a written response to the applicant containing the decision and deliver it to the applicant. If delivered in-person, the applicant must sign for receipt of document.