



CITY OF MARTINSVILLE
55 W CUMBERLAND
PO BOX 340
MARTINSVILLE, IL 62442
PHONE: 217-382-4323
EMAIL: CITY@MARTINSVILLEIL.COM
WEBSITE: WWW.MARTINSVILLEIL.COM

APPLICATION FOR FENCE INSTALLATION PERMIT

1. Applicant's Name: _____
Address: _____
Phone Number: _____
2. Name of Owner(s) of Real Estate (if different than Applicant's):

3. Name of Contractor (if applicable): _____
Address: _____ Phone #: _____
4. Owner/Contractor is responsible for FULLY COMPLETING THE BUILDING PERMIT APPLICATION, Stakeouts and J.U.L.I.E. Locate Requests.
5. Owner agrees that they have read the City of Martinsville Municipal Code Ordinance and the construction/material of the fence abides by city code.

Applicant: _____

Date: _____

Fence Permit Number: _____
Date Issued: _____
FOR CITY USE ONLY