

<b>CU</b> <b>SOLID FENCE</b>	<b>APPLICATION FOR          CONDITIONAL USE</b>	City of Sharonville Department of Building, Planning & Zoning 10900 Reading Road Sharonville, OH 45241 (513) 563-0033 Phone      (513) 563-0617 Fax
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<b>1. Applicant:</b>	<b>2. Owner (If different than applicant):</b>
<b>NAME:</b>	<b>NAME:</b>
<b>ADDRESS:</b>	<b>ADDRESS:</b>
<b>CITY:</b>	<b>CITY:</b>
<b>STATE/ZIP:</b>	<b>STATE/ZIP:</b>
<b>TELEPHONE:</b>	<b>TELEPHONE:</b>

The following conditions shall be met in order to maintain a valid conditional use permit for a Solid Fence [1159.04 (p)]:

- Fence is allowed in the rear yard only
- Solid fence may be no higher than 6'
- Fence must be weather resistant and must be well maintained
- Finished side of the fence must face the abutting properties
- There may be only a single fence. No back-to-back fences.

**Exception: Back-to-back fences are permitted with a separation of 2'-6" or greater.**

- A signature from each affected neighbor is required (Please provide below).

Please attach a site plan showing the proposed location of the solid fence.

<b>I have no objections to the conditional use permit as applied for herein:</b>	
<b>Signature</b>	<b>Address</b>

**Application fee: \$75.00 (non refundable) (BUILDING PERMIT REQUIRED.)**

I agree to and shall comply with the conditions listed above for the solid fence.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Staff Review</b>	
<b>Approved:</b> _____	<b>Date:</b> _____
<b>Denied:</b> _____	<b>Date:</b> _____
<b>Reason for Denial (P.C. approval required):</b> _____	