



City of Merrill

301 E. Second Street, P. O. Box 487 Merrill, Oregon 97633

•Phone (541)798-5808 •Fax (541)798-0145 •Web www.cityofmerrill.org

Flood Zone: YES
 NO

If Yes, contact a surveyor to meet FEMA Guidelines:

Flood Elevation Certificate
 Letter of Map Amendment (LOMA)

Fence Application

(1) TYPE OF WORK			
<input type="checkbox"/> New Construction	<input type="checkbox"/> Replacement	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> Other
(2) ZONE OF CONSTRUCTION			
<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Other
(3) JOB SITE LOCATION			
Tax Lot #			
Physical Address:		Merrill, OR 97633	
(4) DESCRIPTION OF WORK			
(5) PROPERTY OWNER/ APPLICANT INFORMATION			
Name:		Phone #	
Mailing Address:			
City, State, & Zip:			
Email:			
<input type="checkbox"/> Owner	<input type="checkbox"/> Agent	Applicant Signature:	Date:
(6) <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> SUB-CONTRACTOR <input type="checkbox"/> SELF			
Business Name:		Contact Person:	
Address:			
City, State, & Zip:			
Email:		Phone #	Fax #
CCB Lic. No.:		Exp. Date	
Signature:			Date:
(7) NOTICES			
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701.			
Regarding Suspension or Revocation: The City of Merrill in writing, reserves the right to suspend or revoke a permit whenever the permit is issued in error, or on the basis of incorrect information supplied.			

Regarding Expiration: Every approved application shall expire and become void if work authorized is not started, is suspended or is abandoned for a period of a year or more.

If the applicant is not the property's owner, an Agent Authorization Form is required.

(8) REQUIRED

SITE PLAN MAP (SEE SITE PLAN REQUIREMENTS LIST)

WHAT TYPE OF FENCING?

HAVE YOU CALLED 811 LOCATE?

APPROVAL IS REQUIRED BEFORE CONSTRUCTION CAN BEGIN

OFFICE USE ONLY

File #: _____ Fee: <u>No Application Fee</u> Date Received: _____ Received By: _____ Planning Review Date: _____ City Council Review Date: _____	Public Works: <input type="checkbox"/> Approved With conditions <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Signature: _____ Date: _____
Planning: <input type="checkbox"/> Approved With Conditions <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Signature: _____ Date: _____	City Engineer: <input type="checkbox"/> Approved With conditions <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> NA _____ Signature: _____ Date: _____
City Council: <input type="checkbox"/> Approved With Conditions <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Signature: _____ Date: _____	ODOT: <input type="checkbox"/> Approved With Conditions <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> NA _____ Signature: _____ Date: _____

Additional Required Conditions: _____

Approval Stamp: