FENCES

1) Permits are required for the installation of fencing, even if you are replacing an existing fence. The fee for the permit is $35.35. It is the applicant's responsibility to submit a legal survey indicating all property line boundaries. An application should be submitted with a drawing of your lot, and where the fence is going to be placed in relation to your lot boundaries. Note the length, height and type of your fence.

2) Fences can be as high as 6 feet, but cannot come forward of the rear foundation line of your home. Fence posts must face inward, toward the applicant's property. Post holes must be at least 30 inches deep, and posts must be set in concrete.

3) If there is no back door to the house fences may be forward of the side door by 1 foot. Gates may be no higher than 5 feet.

4) Additionally, if you are installing a gate across your driveway, this gate must be decorative (ornamental iron or wood). The gate cannot be chain link.

5) Post hole inspections are required, and a minimum twenty-four hour notice is requested for inspection. A final inspection is also required after completion of the installation.

If your property is situated on a corner lot, please call our Building Department for guidelines regarding fencing. You may also visit our website at www.universityheights.com, and reference Chapter 1448 in the City Codified Ordinances for more information.

The Building Department can be reached at 216-932-7800 between the hours of 8am and 4:30 pm, Monday thru Friday. We are located at 3962 Silsby Road, next to the parking lot for University Heights City Hall.
RESIDENTIAL
NEW STRUCTURE, ADDITION,
ALTERATION, OR CHANGE OF USE
APPLICATION

Please Type or Print

Location: _________________________________  (check one)
Owner of Property: ____________________________
Owner Address: ____________________________

Homeowner Permit
Contractor Permit

City, State, Zip: ____________________________
Phone #: ________________________________
Work #: ________________________________

(check one)
Type of Permit:  ☐ Building  ☐ Demo  ☐ Fence  ☐ Other: ________________________________

CONTRACTOR INFORMATION
Company Name: _____________________________________________
Address: ___________________________________________________
City, State, Zip: ______________________________________________
Phone #: ___________________________________________________
Contact: ___________________________________________________
Contact Phone #: __________________________________________

Are you currently registered with the City of University Heights?

☐ No  ☐ Yes:  Number:________________________  Expiration Date:____________________

DESCRIPTION OF WORK TO BE PERFORMED
Estimated cost of job: $_____________________
Date Installation will begin: _______________________  Completion Date: ______________________
Briefly describe work to be performed: ______________________________________________
______________________________________________________________________________

For Office Use Only
Date: _______________________
Permit #: _______________________
Receipt #: _______________________
Amount: _______________________
Inspector: _______________________
Issued by: _______________________

SITUATION PLAN (Draw sketch of lot including dimensions, all structures and distances from lot lines and buildings)
INSPECTIONS

I, THE UNDERSIGNED, acknowledge responsibility of scheduling all required inspections. The City of University Heights requires a minimum of 24-hour notice for all inspections.

I also agree to conform to and abide by the Building Code and all other Ordinances of the City of University Heights, Ohio. It is understood that in the event of any violations of said Codes or Ordinances, I shall be subject to a fine and refusal of future permits.

Signature ___________________________ Date ___________________________

Printed Name and Title ____________________________________________

For Office Use Only

☐ Approved
☐ Approved as noted: _______________________________________________
☐ More information required: _________________________________________
☐ Denied
☐ Board of Zoning Appeals required: _________________________________

_________________________________________ Date ________________

Building Department Authorization