

CITY OF HAMTRAMCK
3401 EVALINE
HAMTRAMCK, MI 48212
Phone: (313) 876-7700
Fax: (313) 876-7835

Neighbor Mutual Fence Consent Form

We, the undersigned, do hereby mutually agree as to the location and placement of a partition fence between our properties described below and as indicated on the attached approved permit plan.

Property Owner Name Requesting Fence Permit: (please print)

Property Address:

Phone Number:

Signature:

X _____

_____ **Date**

AND

Neighbor's Name: (please print)

Property Address:

Phone Number:

Signature:

X _____

_____ **Date**