CITY OF ST. PAUL

DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
ST. PAUL, MINNESOTA 55101-1806

REQUEST FOR FENCE VARIANCE
$78.00

Visit our Web Site at **www.stpaul.gov/dsi**

Effective: 02/2020

ADDRESS OF VARIANCE:		
OWNER ADDRESS:		
CONTRACTOR ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	FAX:	EMAIL:

FENCE DETAILS REQUIRED (A site plan indicating the location of the fence must be provided with this application)

Proposed length of fence (total lineal feet)	**Proposed height of fence**	**Will the fence be erected on a corner lot?**
Length of Fence: _____	Feet:_____ Inches: _____	Yes_____ No _____

Type of Fence: _____Non-Obscuring Fence _____Privacy Fence _____Barbed Wire Fence

Fence Location: _____Perimeter of Entire Yard _____Front Yard Only _____Rear or Side Yard Only

Sec. 33.07. Fences--Requirements.

Variances. A variance of the fence height regulations may be granted if, after investigation by the building official, it is found that site, or terrain, or nuisance animal conditions warrant a waiver of the height restrictions.

The property on which the fence is proposed satisfies the variance criteria (underlined in preceding box) for the following reason(s):

Check at least one item below and state the reason(s) you believe the property qualifies for variance consideration

___SITE CONDITIONS _____TERRAIN CONDITIONS _____NUISANCE ANIMAL CONDITIONS

REASON FOR VARIANCE REQUEST: _____

---------- **Office Use Only Below This Line** ----------

INSPECTOR'S OBSERVATIONS: _____

INSPECTORS NAME:_____Phone: 651 -_____- _____

_____**APPROVED** Date:_____Building Official:_____Phone: 651 -_____- _____

_____**DENIED** (This decision may be appealed to the legislative hearing officer by calling 651-266-8560.)

RETURN SIGNED RECOMMENDATION TO:_____AT THE FRONT COUNTER.

Signature of Cardholder (required for all charges): _____

☐ **AMEX** ☐ **Discover** ☐ **MasterCard** ☐ **Visa**	**Security Code ►**					**Expiration Date: Month /Year ►**			
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