Electric and / or barbed wire fence

City of Coeur d'Alene

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9	TY BY TH	ELAKE

SUBM	ITTALS		
This re	equest is	s made by submitting the following information to the Planning Department:	
1.	The completed attached form;		
2.	A set c	of drawings (as described in the attached form);	
3.	Other information as may be required by the Planning Department;		
Please	type o	r print the following required information:	
APPL			
		of Applicant: y Address:	
	Teleph	one Number:	
Filing (Capacity	y:	
	1.	Recorded property owner as of(date)	
	2.	Purchasing (under contract) as of(date)	
	3.	The Lessee or Renter as of	
	4.	(date) The authorized agent of any of the foregoing, duly authorized in writing. (Written authorization must be attached to the application)	
PROP Legal I		tion of property:	
Addres	ss(es) o	f property:	

JUSTIFICATION: Attach site and/or building plans which illustrate the request. Prior to approving a request for an electric and/or barbed wire fence, the City Council must make	
specific findings in support of the request. The BURDEN OF PROOF for why the electric and/or barbed wire fence is necessary rests on the applicant. Your narrative should address the following points:	
A. Why is the electric and/or barbed wire fence needed?;	
B. How will the use of the electric and/or barbed wire fence not constitute a hazard to public safety?	
C. Any other justifications that you feel are important and should be considered by the City Council.	

REQUIRED CERTIFICATIONS				
CERTIFICATION OF APPLICANT *				
, being duly sworn, attests that he/she is the applicant of this (insert name of applicant)				
(insert name of applicant) request and knows the contents thereof to be true to his/her knowledge.				
Signed:				
Signed:(applicant) Notary to complete this section for applicant:				
Subscribed and sworn to me before thisday of, 20, 20				
Notary Public for Idaho Residing at:				
My commission expires:				
Signed:(notary)				
CERTIFICATION OF PROPERTY OWNER(S) OF RECORD *:				
have read and consent to the filing of this application as the owner of record of the area being considered in this application.				
Name: Telephone No.:				
Address:				
Signed by Owner:				
Notary to complete this section for all owners of record:				
Subscribed and sworn to me before thisday of, 20,				
Network Dublic for blocks. Deviding ste				
Notary Public for Idaho Residing at:				
My commission expires:				
Signed: (applicant)				
For multiple applicants or owners of record, please submit multiple copies of this page.				
For City use only: Received: City Cashier: Date:				
Accepted: Planning: Date:				
Date Stamp here				