



REQUEST FOR FENCE ROW ENCROACHMENT DETERMINATION

Request for Fence Right-of-Way Encroachment Determination

Homeowner's name(s) _____

Address _____

Home Phone # _____ Cell # _____

I have read the Fence Encroachment requirements described in the Permit Criterial Manual, Permit Requirements – Right-of-Way Permits, Subsection G found at www.sunshinewcd.net. I request District review of the right-of-way adjacent to my property for the purpose of a fence installation that encroaches on District property.

Signature(s): _____
Property Owner

Property Owner

Date

Submit form by:

Fax: (561) 571-0013

Email: info@sunshinewcd.net

Mail: Wrathell, Hunt and Associates
2300 Glades Road, Suite 410W
Boca Raton, FL 33431