



Ville d'Hudson/Town of Hudson
Service d'urbanisme/Planning department
64 Cedar, Hudson
J0P 1H0
Phone: (450) 458-0222
Fax: (450) 458-0241

Permit Application

Request started on: _____ Request Completed on: _____ Req. No

Entered by: _____

Permit Type: **Installation of a fence, wall or gate**

Identification

Owner

Name: _____
Address: _____
City: _____
Postal Code: _____
Phone: _____

Applicant

Name: _____
Address: _____
City: _____
Postal Code: _____
Phone: _____

Information on the fence

Material: _____

Height: _____

Length: _____

Contractor: _____ Telephone: _____

Work value: _____

Distance from property lines

Front: _____

Back: _____

Left side: _____

Right side: _____

| Required documents | Receipt | Receipt date |
|---------------------|--------------------------|--------------|
| Form duly filled in | <input type="checkbox"/> | |
| Plan of the fence | <input type="checkbox"/> | |
| Plot plan | <input type="checkbox"/> | |

Applicant's signature

Applicant's signature _____ Date: _____