

DOMESTIC FOWL REGISTRY APPLICATION \$10 to be paid at the time of application to City Hall

| Property Owner Information | | |
|---|--|---|
| Address | | |
| AddressSTZIP CitySTZIP E-mailPhone | | |
| | | |
| Applicant Information | | |
| Name | DOB | |
| Address City | | |
| E-mail | SIZIP | · |
| | | |
| Other Adult Occupants Name | DOB | Phone |
| Name | DOB | Phone |
| | perty | |
| Domestic Fowl Information Type of Fowl(see list of allowed fo | wl) | |
| Number of Fowl (limit of 6) | | |
| Type of Enclosure/description | | |
| NOT INCLUDE • 24-hour Emergency Infor | D : roosters, geese, guin mation | nickens, ducks, quail, sage hens, and pigeons nea fowl, peacocks, and turkeys complaint about domestic fowl on your property. |
| Contact name | | Phone |
| Setbacks: Coops, cotes, pertwenty-five(25) feet from the owner's dwelling. Enclosure. Domestic fowl shall ventilated and designed to feet per fowl. Domestic fow contain the birds on the prevent accumulation of ware. Sanitation. The coop and offensive odors. The Coop prevent accumulation of ware. Roosters. It is unlawful for I certify under penalty of law that this document and attachment, a obtaining the information here. | ens, and other enclosures I he door or window of any d shall be enclosed on all side be provided with a covered be easily accessible for cle wi shall have access to an operty and to prevent preda outdoor enclosure must be b and outdoor enclosure must aste. • any person to keep rooste I have personally examined and that based on my inquir rein, I believe the submitted | for each single-family dwelling housing domestic fowl shall be kept at least dwelling or occupied structure other than the des and not be allowed to fly or run at ed, predator proof coops or cages that are well leaning. The coop shall allow at least two square outdoor enclosure that is adequately fenced to lators from access to the birds. e kept in a sanitary condition and free from nust be cleaned on at least a weekly basis to ers. ed and am familiar with the information submitted in ity of those individuals immediately responsible for ed information is true, accurate, and complete. |
| | | |
| Signature | | Date |
| | | Permit Fee Paid |
| Arcine Thompson- Zoning Ap | Administrator Kris plication Renewal By Date | istin Hutsler - Code Enforcement |