

CITY OF SOUTH BURLINGTON
B A C K Y A R D C H I C K E N P E R M I T A P P L I C A T I O N

Applicant: _____	Application No: _____ <small>[office use only]</small>
Property Street Address: _____	Daytime phone: _____
Property Owner: _____	
Address: _____	Tax Parcel ID No. _____

1. TYPE of Permit Request:

New Permit OR **Renewal of Existing Permit (Application # _____)**

2. TYPE of Property:

- Individual lot [up to six (6) chickens]**
- Residential Condominium without individually-owned backyard [up to six (6) chickens per residential bldg]**
- Land owned by a fire district [up to fifteen (15) chickens]**

3. ATTACH sketch of property indicating areas where chickens are to be kept and distances to all adjacent property lines.
 [notes: (1) all henhouses, enclosures, chicken tractors, and fenced areas shall be kept no less than twenty (20) feet from all property lines. This requirement may be reduced to five (5) feet from a property line with written approval from the neighboring property owner. (2) all henhouses, enclosures, chicken tractors, and fenced areas located on land owned by a fire district shall be kept no less than twenty (20) feet from all property lines. This requirement may be reduced to five (5) feet from a property line with written approval from the neighboring property owner]

4. ATTACH written approval of adjacent property owners (if applicable). Indicate on the SKETCH which property lines the adjacent property owner abuts. [note: all written approvals shall be granted no greater than thirty (30) days prior to the submittal of the application.]

5. INDICATE the size of your henhouse _____ [notes: (1) henhouses shall not exceed thirty (30) square feet in size. (2) henhouses located on land owned by a fire district shall not exceed seventy (70) square feet in size]

6. APPLICANT/OWNER CERTIFICATION

The undersigned property owner hereby consents to submit this application and understands that if the application is approved, the Permit and all provisions of the South Burlington Backyard Chicken Ordinance will be binding on the property.

Property Owner Signature	PRINT NAME	Date
Applicant Signature	PRINT NAME	Date

OFFICE USE ONLY – ADMINISTRATIVE ACTION – OFFICE USE ONLY

DATE Received: _____ FEE Received: \$ _____

APPROVED **DENIED**

Date

City Manager or Designee's Signature

REASON for DENIAL (if applicable) _____

Permit EFFECTIVE date _____ Permit EXPIRATION date _____