



Keeping of Fowl Permit Application

***All sections of this application must be complete upon submittal, or the application will be deemed incomplete and denied.**

Property Owner: _____ Address of Property: _____

Tax ID/Parcel Number: _____

Name(s) of Applicant(s): _____

Mailing Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Property Site Plan: Provide a site plan of the lot layout. Show and label property lines, street(s), dwelling, accessory buildings, and distance of nearest residential dwellings. Provide the footprint dimension for all buildings. Provide dimension and height of chicken coop.

Containment and Protection (checklist):

- Fowl shall be kept within a building, coop, or enclosure, and within a fully enclosed and fenced rear or side yard such that fowl may not be at large within the city.
- The building, coop, or enclosure in which the fowl are kept must be at least five (5) feet from any dwelling, other than the dwelling associated with the accessory use.
- The building, coop, or enclosure shall be durably constructed and maintained in conformance with the West Virginia State Building Code.

Prohibitions:

- The number of fowl shall not exceed six (6)
- No roosters
- Slaughtering and processing fowl are prohibited within the city, except where such activity occurs within a butcher shop.
- Keeping of fowl shall not take place in the front yard of any lot. *Urban agriculture uses are permitted in side and rear yards, as well as on rooftops.*

Applicant Certification:

I certify under penalty of perjury that this application and all information submitted as a part of this application is true, complete, and accurate to the best of my knowledge. I also acknowledge that I have reviewed the Elkins Zoning Ordinance regarding this application and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. I agree also to comply with any and all applicable City Ordinances in effect at this time. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that the City of Elkins may rescind any approval or take any other legal or appropriate action. I also agree to allow the staff or appointed agent(s) of the City to enter the subject property to make any necessary inspections thereof.

Applicant Signature: _____

Date: _____

Property Owner Signature: _____

Date: _____

Office Use Only

Application #: _____

Zoning District: _____

Permit Issued: _____

Date Received: _____

Inspection Date: _____

Renewal Date: _____

Zoning: Approved Denied

Decision Date: _____

Zoning Officer Signature

City Clerk Signature