

# Application for Backyard Chicken Permit



**Town of Bristol**  
303 E. Vistula Street

P.O. Box 122  
Bristol, IN. 46507  
phone 574-848-7007

Date \_\_\_\_\_

Application/Permit # \_\_\_\_\_

New permit

Renewal permit

Permit fee \$ 25 per 2 years

**Payment must accompany complete application for permit to be issued following site inspection by code enforcement officer**

Name: \_\_\_\_\_

Physical address: \_\_\_\_\_ Zip code \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home phone: \_\_\_\_\_

email address: \_\_\_\_\_

Mailing address ( if different ) :  
\_\_\_\_\_  
\_\_\_\_\_

To be submitted with application :

- 1 Floor plan and side elevation of coop , and exercise yard
- 2 Site drawing listing distances to all adjacent buildings and property line
- 3 **Signatures of property owner if applicant is not owner**
- 4 Signatures of adjacent property owners not separated by street or alley
- 5 Premise ID from Indiana Board of Animal Health (IBOAH) application here:

[Premise ID](#)

[www.in.gov/boah/forms](http://www.in.gov/boah/forms)

**Limitations:**

maximum 6 chickens, no roosters  
selling of eggs and fertilizer not allowed  
slaughtering not allowed on premise  
chickens may not be turned loose or taken to Humane Shelter  
applicant must have no code violations in last 6 months

**Coop requirements:**

15 feet from property line  
20 feet from adjacent residential  
2 sq ft per chicken  
good housekeeping around coop  
effectively contain and protect chickens

**A full copy of ordinance available at Town Hall**

# Signature page

Application /Permit # \_\_\_\_\_

Signature of adjoining neighboring property owner

Phone: \_\_\_\_\_

\_\_\_\_\_

address \_\_\_\_\_

Signature of adjoining neighboring property owner

Phone: \_\_\_\_\_

\_\_\_\_\_

address \_\_\_\_\_

Signature of adjoining neighboring property owner

Phone: \_\_\_\_\_

\_\_\_\_\_

address \_\_\_\_\_

Signature of adjoining neighboring property owner

Phone: \_\_\_\_\_

\_\_\_\_\_

address \_\_\_\_\_

**Signature of applicant:** \_\_\_\_\_

Date: \_\_\_\_\_

Signature of property owner (if applicable)

Phone: \_\_\_\_\_

## Code Enforcement actions

Date complete application received. \_\_\_\_\_

Date approval to proceed \_\_\_\_\_

Date of inspection \_\_\_\_\_

Approved

yes

No


**Signature code enforcement**

**Signature Clerk-Treasurer**

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Date : \_\_\_\_\_