5858 King Highway, Kalamazoo MI 49048 PO Box 449, Comstock MI 49041-0449 Phone: 269-381-2360 Fax: 269-381-4328

PLEASE PRINT

APPLICANT:	
Name	
Address	
Phone	
Email	
Is the property owned or leased/rented*? * If leased/rented, written permission from the property own COMPLETE ALL ITEMS FOLLOWING:	ner must be submitted.
Informational Item	Response
Number of hens that will be kept at the above location: (<i>up to 6 hens allowed, roosters are prohibited</i>)	
Combined size of the coop and pen: (limit is 90 square feet)	
Height of the coop and pen: (limit is 7 feet)	
During daylight hours, chickens will roam in rear yard area outside of the coop/pen: Indicate *Yes/No *If yes, chickens must be supervised and the area where they will roam n	
*If yes, chickens must be supervised and the area where they will roam n minimum 4-foot high fence.	nust be enclosed by a
ATTACH a sketch or drawing of the coop and pen and DESCRIF that will be used to construct them:	BE below all the materials
DESCRIBE how and where feed and other items associated with prevent rats, mice or other rodents from gaining access:	the chickens will be stored to

ATTACH a site sketch and photographs or other information showing the location of the coop, pen, storage areas for feed and outdoor roaming area. The site sketch should include at least the following information:

- Property Lines and Dimensions
- Building Locations
- Coop and Pen location and setback distance from all property lines
- Setback distance from homes on adjacent properties
- Location, type and height of existing and proposed fences
- Areas where chickens will be allowed to roam outside the coop/pen, if applicable
- Storage area and method of handling feed or other items
- Storage area and method of handling manure/waste

INCLUDE the \$25 permit application fee.

ACKNOWLEDGE AND SIGN

I (we), the undersigned, acknowledge that I (we) am aware of the requirements for approval of a permit to keep chickens and all regulations and obligations thereto will be fulfilled as required by Ordinance or the permit will be revoked by the Township and all chickens will have to be removed from the property within 72 hours of notice being provided by the Township of an ordinance violation or I (we) will be issued a citation and fine for a municipal civil infraction and be subject to further legal action by the Township.

I(we) have reviewed and understand Section 4.11.1 of the Comstock Township Zoning Ordinance which addresses the keeping of chickens. I (we) understand that I (we) must call for an inspection of the coop and pen within 10 days of receiving the permit.

Applicant's Signature	Date
Print Name	
Property Owner's Signature (if different than applicant)	Date
Print Name	

TOWNSHIP USE ONLY	Date Receiv	red:	Permit Number:
Planning & Zoning A □ Approved. □ Approved with C □ Denied.		ction:	Ordinance Enforcement Officer Action: □ Reviewed – no violations at site presently or in six months prior to date of review. □ Denied – violations of Township Ordinances at the property presently or in last six months.
Conditions:			
Comments or Reason for Denial:			
Permit Issued:yesno			
		Date:	
Ordinance Officer: _			Date:
Inspected:			
Ву:			Date:
*Application will no without payment of Required Fee: \$25.0	required fee:	Initials	No Receipt #