

3. OPERATING STANDARDS, MAINTENANCE PLAN AND RODENT CONTROL PLAN

1. The ownership, care and control of the chickens will be the responsibility of the applicant.
2. I have received a copy of the ordinance amending Chapter 14 (animals) and understand the responsibility of keeping and caring for chickens. Taking a class on urban chicken keeping is recommended.
3. There will be a maximum of _____ chickens kept on the property.
4. No roosters will be kept on the property.
5. The coop and run conforms to City regulations for accessory structures as identified on this application, five feet from side and rear property lines and ten feet from the principal structure.
6. No chicken coop and run shall be placed within an easement or block public access.
7. I will ensure that noise from chickens at the property boundary conforms to the City's noise ordinance.
8. I will ensure that odors from chickens, chicken manure, or other chicken-related substances shall not be perceptible at the property boundary.
9. I will compost the waste generated from keeping of chickens with carbonaceous material such as hay, bedding, or leaves or store it in a sealed container until its removed from the property.
10. I will clean the coop and run at least on a weekly basis. A detailed written maintenance plan may be required.
11. I will keep the chickens on the subject property and will not allow them to wander onto other properties including the City owned land.
12. I will not allow the chickens or coop and run in front or side yard.
13. I will store the chicken feed in a rodent-proof container inside the primary structure.
14. I will remove chicken feed from any area accessible to rodents or other pests after dusk.
15. I will construct or purchase a secure coop or run so as to exclude predators and rodents. A detailed plan describing measures that will be taken to prevent pests and rodents may be required.
16. There is a perimeter barrier around the bottom edge of the coop and run to prevent predators from burrowing beneath to enter.
17. The run is fully enclosed with a roof or wire cage material on top.
18. I hereby acknowledge the City of Edwardsville by issuing this license has authority to enter my property to perform periodic inspections as needed to verify compliance with the standards of the ordinance.



CITY OF EDWARDSVILLE
APPLICATION FOR BACKYARD CHICKEN COOP/RUN
APPLICATION SITE PLAN

Applicant Name: _____

Address: _____

Phone: _____ Email: _____

1. Number of hens proposed: _____
2. Coop Height: _____
3. The total square feet of coop: _____
4. The total square feet of run: _____

Use the area below to provide a detailed drawing depicting the yard, coop, run, and fencing, including size, height, material and location of each. Include distances from lot lines, structures (houses, sheds, and garages), fences/barriers, pools, etc. Identify neighbors whose property line connect to your property (abutters), including diagonal, behind, as well as any properties within 100 feet of your parcel, including across an alley, street, or Right-of-Way.

Surrounding Property Owner Acknowledgement Sign Off Sheet

NOTICE: The undersigned Property Owners hereby agree that they do not oppose the applicant from keeping backyard chickens at the subject site and have been presented with a copy of the Domesticated Chicken Ordinance (ORD # 6063-01-18) for review.

All properties abutting and within 100 ft of the subject site _____:
(address)

North

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

South

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

East

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

West

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

Additional abutting/adjacent lots within 100 ft as necessary (attach additional sheet if necessary):

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

Property Owner Name: _____
Address: _____
Phone #: _____
PO Signature: _____

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