



# NORFOLK

Department of Public Health

## ENVIRONMENTAL HEALTH CHICKEN PERMIT APPLICATION

NEW  RENEWAL

PERMIT # \_\_\_\_\_

PLANNING DISTRICT# \_\_\_\_\_

LAST FIRST MIDDLE

STREET ADDRESS CITY STATE ZIP

HOME PHONE NUMBER CELL PHONE NUMBER E-MAIL ADDRESS

NUMBER OF FEMALE CHICKENS: \_\_\_\_\_

I, hereby certify that the above information is true and correct. I also affirm that Attachments A-C are true and correct. I understand and agree to abide by the terms and conditions for a Chicken Permit, Norfolk City Code 6.1-7. I understand that the application/permit fee is nonrefundable. I understand that failure to comply with regulations may result in revocation of the permit and/or subject to criminal penalties prescribed by law. I have also read and initialed the terms of this application.

SIGNATURE OF APPLICANT DATE

### PLEASE READ THE FOLLOWING REQUIREMENTS CAREFULLY AND INITIAL EACH TO SHOW YOU HAVE READ AND UNDERSTAND THE CHICKEN ORDINANCE.

\_\_\_\_\_ I have read the Norfolk City Code Section 6.1-7 and understand the requirements for keeping chickens.

\_\_\_\_\_ I am aware that I first must receive approval from the Norfolk Department of Public Health, Bureau of Environmental Health (NDPH EH) prior to obtaining chickens.

\_\_\_\_\_ I will follow all City ordinances and State laws relating to the care and keeping of animals.

\_\_\_\_\_ I am aware that I am responsible for keeping chickens within the confines of my property at all times.

\_\_\_\_\_ I am aware that I may not make any dimensional changes (affecting required property set-offs or boundaries or minimum required space) to my chicken coop without first obtaining approval from NDPH EH.

\_\_\_\_\_ I am aware that a maximum of six (6) female chickens shall be allowed under permit. Each chicken shall have an identification band attached to the leg or wing with a number specific to that chicken.

\_\_\_\_\_ I grant the right for City staff to inspect my property at any time to ensure compliance and to investigate complaints.

\_\_\_\_\_ I acknowledge that I live in a single-family dwelling as per zoning code and if I rent I have approval from my landlord (See attachment).

\_\_\_\_\_ I am aware that I may not add to the number of chickens listed on this application without first obtaining approval from NDPH EH.

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\_\_\_\_\_ I understand that the permit is not transferrable from one individual or location to another.

\_\_\_\_\_ I understand the private restrictions on the use of the property shall remain enforceable and shall supersede the permit. I affirm that there are no private restrictions including, but not limited to, deed restrictions, condominium restrictions, neighborhood association bylaws, covenants, and restrictions and rental agreements. A permit issued to a person whose property is subject to private restrictions that prohibit keeping of chickens is void.

\_\_\_\_\_ I acknowledge that I am aware that the ordinance allowing chickens may be amended or repealed and that the owner acquires no vested rights to have or raise chickens by virtue of the issuance of the permit.

\_\_\_\_\_ I understand that the keeping and handling of chickens may cause health hazards and that adequate health precautions are the responsibility of the applicant.

**OFFICIAL USE ONLY – TO BE COMPLETED BY STAFF ONLY**

AMOUNT PAID \_\_\_\_\_ CREDIT CARD/CASH \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

Applicant Meets Requirements \_\_\_\_\_ Does Not Meet \_\_\_\_\_ Corrections Needed \_\_\_\_\_

Supervisor's Review \_\_\_\_\_

Comments \_\_\_\_\_

Approval \_\_\_\_\_ Denied \_\_\_\_\_

Reason for Denial \_\_\_\_\_

PERMIT ISSUED: \_\_\_\_\_ Issuance Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Permit Number \_\_\_\_\_ Chicken Band ID Numbers \_\_\_\_\_

\_\_\_\_\_  
ENVIRONMENTAL HEALTH DIRECTOR OR DESIGNEE(S) DATE

Norfolk Chicken Application 11/19/2014



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## Attachment A

Describe or draw the chicken coop and pen including materials used and dimensions of coop and pen

## Attachment B

Sketch a diagram below or attach a diagram of the property including the dimensions and

- Identify the adjacent properties by street address
- Indicate the location of coop and pen
- You may log onto <http://norfolkair.norfolk.gov/norfolkair> to obtain a diagram with dimensions.

## Attachment C

To be completed only if the applicant is a tenant.

I am the owner/landlord of \_\_\_\_\_, Norfolk, VA, and I give permission for my tenant,

\_\_\_\_\_ to install a chicken coop and keep chickens on the property.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contact Telephone Number

\_\_\_\_\_  
Date