GLEN OSBORNE BOROUGH
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Phone: 412-699-3850
glenosborneborough.org

Chicken Permit Application

Applicant must refer to **Chapter 48, Article I** et seq., complete all steps on Chicken Keeping, and return this completed application with appropriate fees. No work may begin until an approved permit is returned to the applicant. Applicant must comply with all Borough ordinances and submit all required fees or application shall be considered incomplete.

Application For (select one): ☐ Chicken Raising ☐ Initial Permit (by Zoning Officer)

Date: _____ Lot & Block Number: _____

Owner's Name: _____

Owner's Address: _____

Phone Number: _____ Email:_____

If rental property, provide landlord name and address:

_____

A copy of drawing(s) or lot plan(s) must be submitted with this application. Applications without required documentation will be denied.

FOR OFFICIAL USE ONLY

Permit No.: _____ Zoning District: _____

Date Approved: _____ Date Expired: _____

Checklist attached and completed in full? ☐ Yes ☐ No

Other ordinances affecting this application:

_____

Comments:

_____

Approval Signature: _____