

# Application for License to Keep Poultry/Restricted Poultry



## Details of Applicant

Name:

Residential Address:

Postal Address:

Phone: (W)

(M)

Fax:

Email:

## Additional Details

Number of poultry:

Size of property: (m<sup>2</sup>)

Details of enclosure for poultry:

Do you have strategies for nuisance mitigation?

Please indicate on sketched plan below, the placement of the enclosures and other structures on the property. Please include distances, fencing and boundaries.

Signature:

Date:

**Please Note:** Poultry must be kept in such a manner that they do not cause a nuisance to another person. Further information can be obtained from the City of Kalamunda Health Services on 9257 9813.