City of Beaverton
Pigeon Permit Application

P.O. Box 4755
Beaverton, OR 97076
(503) 526-2270
(503) 526-3730 fax
http://www.ci.beaverton.or.us

Today's Date: _____

Applicant Name:_____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Property Owner Name: _____
(if different)
Property Owner Address: _____
(if different)
City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

E-mail: _____

Number of Birds _____ Size of the Enclosure: _____

PIGEON ENCLOSURE SITE PLAN

Address/location of the pigeon enclosure:

_____

Please provide a sketch of the proposed location for the enclosure below. Show the location of adjacent structures and the distance to any structure within 150 feet:

The conditions on this permit are as follows:

1. Pigeons must be banded and kept in an approved enclosure except during reasonable periods of time for exercise or racing.

2. Pigeons will not be allowed to perch or rest upon any building, structure or property other than an approved enclosure.

3. Pigeons will not be allowed to disturb the comfort and repose of the residents in the neighborhood by any noise, odor, trespass, or damage to their property.

4. Enclosures shall be maintained in a clean and sanitary condition free from all offensive odors.

5. Enclosure shall be designed for the pigeons to enter but not to escape.

6. Pigeon enclosures must be located at appropriate distances from dwellings as specified in Section 5.10.030 of the Beaverton Code:
   - 30 feet from any dwelling if 50 or fewer pigeons are kept.
   - 50 feet from any dwelling if 100 or fewer pigeons are kept.
   - 100 feet from any dwelling if 150 or fewer pigeons are kept.
   - 150 feet from any dwelling if 200 or fewer pigeons are kept.

OFFICIAL USE ONLY

Application No.: _____

Inspected by: _____ Date of Inspection: _____

LOCATION IS:

- ❑ APPROVED
- ❑ APPROVED WITH ADDITIONAL CONDITIONS:

Effective with Applicant's Signature:_____ Date: _____

- ❑ DENIED

Mayor or Designee: _____ Date: _____

Title: _____