TOWN OF CLYDE PARK
APPLICATION TO KEEP LIVESTOCK
IN THE CITY LIMITS

NAME _MB Lockhart_

PHYSICAL ADDRESS _303 Taft ave_

PHONE NUMBER _220-1352_

LOCATION OF PASTURE

OWNER OF LAND INTENDED FOR PASTURE _MrsLockhart_

DIMENSIONS OF LAND INTENDED FOR PASTURE
225' x 390' + 180' x 190' + 105' x 140' + 60 x 100 + 60 x 100' = 3.41 Acres

TYPE OF FENCE AROUND INTENDED PASTURE LAND
Post-rail

TYPE OF LIVESTOCK/CHICKEN _horses / chickens_

AMOUNT OF LIVESTOCK/CHICKEN _6 & 6_

    I/We hereby attest that the above information is true and correct. I/We have read, understand and received a copy of the Clyde Park Code Book-Chapter 8.04. I/We agree and understand that if I/We violate any of the conditions of the Chapter or if any of the above information is falsely stated, this permit may be revoked at the discretion of the Mayor and Town Council of Clyde Park.

FEE ($10.00 PER HEAD OF LIVESTOCK): _$60 horses $15 chickens_ RV 1888

CHECK NUMBER: _#2742_   CASH: _____

THIS PERMIT WILL EXPIRE: _____

SIGNATURE OF LAND OWNER: _[signature]_

SIGNATURE OF LIVESTOCK OWNER: _[signature]_

_____

_____

_____

TOWN COUNCIL   MAYOR

TOWN OF CLYDE PARK
ANNUAL PERMIT FOR KEEPING LIVESTOCK

APPLICANT NAME: Mrs Lockhart

PHYSICAL ADDRESS: 303 Taft Ave

PHONE NUMBER: (406) 220-7356

TYPE OF LIVESTOCK: horses /chickens

MAXIMUM NUMBER OF LIVESTOCK: 6 & 6

I hereby request permission to keep the animals listed above at the described location. I understand that this permit may be revoked at any time for just cause. Further, I understand that this permit is based on Clyde Park Municipal Codes, Chapters 8.04 and 8.06 and does not prevent action from being taken for any other violations of the Clyde Park Town Code or Ordinances. This permit does expire on December 31st of every year, and has to be reapplied for.

APPLICANT SIGNATURE:

DATE: 1/25/26 AMOUNT PAID: 105.00 CHECK CASH: 2242 RV 1888

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CLYDE PARK TOWN COUNCIL

Date of consideration: _____

Remarks: _____

_____

_____

_____   _____APPROVED

_____

_____   _____DENIED

_____

COUNCIL   MAYOR

Re-Application Date: _____