

## **RENEWAL APPLICATION FOR THE KEEPING OF CHICKENS**

For the Licensing Period begin	nning, 20 and e	nding December 31, 20
Land Owner Name:		
Address of Premises:		Dodgeville, WI 53533
Applicant Phone Number:	Email:	@
Tax Parcel Number:		
Number of Chickens Kept: (Maximum of 5 hens. Roosters are not allowed).		

Please include:

- ✓ Proof of Registration and/or site number with WI Dept. of Agriculture, Trade & Consumer Protection
- ✓ Annual Fee of \$25 payable to the "City of Dodgeville". Please indicate "Chicken Permit Renewal" in the memo line.

I certify that all information provided on the application and the background information is true and correct to the best of my knowledge and understand that providing false information or failing to disclose information will be grounds for denial of this license.

Signature

Date