## CITY OF DODGEVILLE APPLICATION FOR THE KEEPING OF CHICKENS Reference Chapter 12.16

Submit to City Clerk

For the license period beginning \_\_\_\_\_\_, 20\_\_\_\_, 20\_\_\_\_

Name:
Address of Premises
Applicant Phone Number:
Tax Parcel Number :

[Include lot size and scaled drawing of lot with location of existing structures and proposed chicken coop as well as dwelling units on properties within 100 feet of proposed chicken coop location]

Number of Chickens kept: \_\_\_\_\_ (Maximum of 5 hens. Roosters are not allowed.)

Wisconsin Department of Agriculture, Trade and Consumer Protection Registration and/or site number proof attached

## TO BE COMPLETED BY BUILDING INSPECTOR:

Building Inspector Review/Approval:   Location of coop approved per specifications provided.   Zoning permit issued for building of coop.   YES   NO   YES	
Building Permit Number Issued by the Bldg. Inspector	

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.

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