

VILLAGE OF BIRON

451 KAHOUN ROAD Wisconsin Rapids, WI 54494 Ph: (715) 423-6580 • Fax: (715) 423-6582

Chicken Permit Application (Up to six (6) chickens permitted. NO ROOSTERS)

FOR OFFICE USE ONLY						
Date Received: Date Paid:		Property Zoning:		Permit #:		
PROPERTY INFORMATION						
Site Address:					Parcel #:	
Owner Name:		Owner Address, City, State, and Zip:				
Owner Phone Number:		Owner Cell Phone Number: Owner Email A			ddress:	
ABUTTING PROPERTIES INFOR	MATION (APPLIC	CANTS MUST RECEIVE V	VRITTEN APPROVAL FRO	M NOT LESS	S THAN FIFTY I	PERCENT OF THE
OWNER-OCCUPIED NEIGHBORIN	IG PROPERTY O	WNERS WHOSE PROPE	RTY IS WITHIN 100 FEE	T OF THE AP	PLICANT'S PR	OPERTY LINES
EXCLUSIVE OF STREET RIGHT-C	F-WAY PRIOR T	O APPROVAL OF SAID L	ICENSE BY THE VILLAGE	BOARD.) S	SEE ATTACHE	ORDINANCE.
Name:		Address:				Date of Contact:
Name:		Address:				Date of Contact:
Name:		Address:				Date of Contact:
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Current lune and a						
SUPPORTING INFORMATION		!4l				
The following materials a						
☐ Plot Plan Showing the				h :! al :	!4 !	
☐ Plans and Specificatio	ns for the Co	op and Attached En	ciosure (a separate	building p	ermit is req	uirea for the
initial construction)						
Proof of Livestock Registration with the Wisconsin Department of Agriculture						
Permit application fee	of \$20. Must	apply annually for a	a permit.			
I understand that I am subje	ect to all applic	cable codes, statutes	and ordinances and	with the co	nditions of th	is permit;
understand that the issuand						
certify that all the above info						
agent, permission to enter t	he premises for	or which this permit is	s sought, at all reason	able hours	and for any	proper purpose
to inspect the premises for						
of my intent to keep and main		, , ,	,	ner of the p	roperty as lon	g as they hold
ownership of the parcel. This	permit is not tra	nsferrable to another p	arcel or a new owner			
Applicant (Sign):			Print:			_ Date:
						Data
Clerk (Sign):			Print:			_ Date: