



5043 CHESTER LANE • RACINE, WI
53402 PHONE (262) 835-6414

**VILLAGE OF CALEDONIA-
KEEPING OF HENS-
NEW APPLICATION**

Permit No.
Date Rec'd:
Date Issued:

FOR THE LICENSE PERIOD BEGINNING _____, 20____ AND ENDING DECEMBER 31, 20____

Applicant Name:	Phone: ()
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Contractor Name:	Contractor or Applicant Email:	Contractor Phone: ()
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Address of Premises:	Number of Hens to be Kept:
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APPLICANT SIGNATURE _____

I hereby acknowledge that I have read this application and state that the above information is correct and agree to comply with Ordinances of the Village of Caledonia and State of Wisconsin laws regulating the construction of buildings and to observe and maintain the legal requirements as provided by the Caledonia Village Ordinance.

**TO BE COMPLETED BY THE BUILDING/ZONING INSPECTOR PRIOR TO
ISSUANCE OF PERMIT.**

CLERK'S OFFICE REVIEW/APPROVAL

Attachments Filed:

- _____ Proof Of Registration with the WI Dept. of Agriculture, Trade, & Consumer Protection
- _____ Scaled Drawing of Lot including the location of any existing structures, the proposed chicken coop, and any dwelling units on the property within 100 feet of the proposed chicken coop
- _____ \$50 Annual Application Fee
- _____ \$100 New One Time Filing Fee

BUILDING/ZONING INSPECTOR REVIEW/APPROVAL

Date Reviewed By The Zoning Department _____ Pass/Fail
Date Inspected By The Building Department _____ Pass/Fail
Date Inspected By The Engineering Department _____ Pass/Fail