



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

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

Permit No.

Date Rec'd:

Date Issued:

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

Applicant Name:

Phone:

()

Contractor Name:

Contractor or Applicant Email:

Contractor Phone:

()

Address of Premises:

Number of Hens to be Kept:

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.

CLERK'S OFFICE REVIEW/APPROVAL

Attachments Filed:

_____ Proof Of Registration with the WI Dept. of Agriculture, Trade, & Consumer Protection
_____ \$50 Annual Application Fee