



VILLAGE OF ASHWAUBENON
PERMIT APPLICATION
KEEPING OF CHICKENS

Pursuant to Sec. 4-1-5, Village of Ashwaubenon Municipal Code

Owner Name: _____

Street Address: _____ Email: _____

Ashwaubenon, WI _____ (zip code) Telephone: _____

Number of birds: _____ Size of coop: _____

DATCP Registration Completed: [] Yes [] No
https://datcp.wi.gov/Pages/Programs_Services/PremisesRegistration.aspx
(Initial application only - attach verification)

Written approval from neighbors within 100' of coop [] Yes [] No
(Initial application only - attach written verification)

Accessory structure permit obtained for the coop? [] Yes [] No

Will electricity be run to the coop? [] Yes [] No
(If yes - an electrical permit will be required)

Signature of Applicant/ Property Owner

Date

Structure location approved by Development Department: [] Yes [] No

Print Name: _____ Title _____

Signature

Date

Annual Permit expires December 31 of each year. Renewal reminders will not be mailed out.

Fee: \$50.00 PAID _____
Date

PERMIT NO. _____

DUPLICATE AS NEEDED

I hereby certify that I have received a copy of ORDINANCE NO. 06-1-14 relating to keeping of chickens in the Village of Ashwaubenon and further certify that my signature below provides permission for the applicant, my neighbor, to keep chickens under the conditions of the municipal code.

PRINT NAME:

ADDRESS:

SIGNATURE:

DATE:

PRINT NAME:

ADDRESS:

SIGNATURE:

DATE:

PRINT NAME:

ADDRESS:

SIGNATURE:

DATE:

PRINT NAME:

ADDRESS:

SIGNATURE:

DATE:

***Complete for all owner-occupied neighboring property owners within 100 feet of chicken coop – to be included with Permit Application**