

Village of Stetsonville

Application for the Keeping or Maintaining of Chickens

Date: \_\_\_\_\_

Property Owner (s) Name (s)

Address

Mailing Address

Home Phone Number

Work Phone Number

Cell Phone Number

Number of Chickens: \_\_\_\_\_

State of Wisconsin )

County of Taylor ) ss.

The undersigns being first duly sworn on oath, deposes and say that he/she is the homeowner named in the foregoing application and he/she has read and understand the attached Ordinance #250

Property Owner's Signature

Date

Property Owner's Signature

Date

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

FOR THE PERIOD from \_\_\_\_\_ to \_\_\_\_\_.

Given under my hand and the corporate seal of the Village of Stetsonville.

Shawn Sullivan, Clerk/Treasurer

Office Use:

Date Received: \_\_\_\_\_

Attachments: \_\_\_\_\_ Landlords Approval, if necessary:

\_\_\_\_\_ List of Abutting Property Owners

Fee Received: \_\_\_\_\_ (\$15.00) Receipt #: \_\_\_\_\_

Signature of Clerk/Treasurer \_\_\_\_\_ Date: \_\_\_\_\_

