



# CHICKEN COOP PERMIT APPLICATION

CITY OF JANESVILLE - BUILDING DIVISION  
 18 N. JACKSON ST., Janesville WI 53548  
 (608) 755-3060

Permit #: BP \_\_\_\_\_

Parcel # \_\_\_\_\_

<b>Building Address</b>	<b>Property Owner's Name</b>	<b>Property Owner Phone</b>	<b>Owner's E-mail Address</b>
<b>Tenant Name (If applicable)</b>	<b>Tenant Phone</b>		<b>Tenant Email Address</b>

<b>NEW CHICKEN COOP:</b>		<b>Estimated Total Project Cost</b>
_____ Number of Chickens (4 maximum)		\$
_____ State Registration Number		<b>Permit Fee</b>
_____ Property Deed Restrictions have been checked for compliance		\$
_____ Size of Coop (24 sf max.)	_____ Size of Run (40sf max)	
Setbacks: From your house _____ ft.	From rear property line _____ ft.	From side property line _____ ft.
From right side property line _____ ft.	From the closest neighbor's house _____ ft.	

<b>RENEWAL OF A CHICKEN COOP:</b>	<b>RENEWAL Permit Fee</b>
Please answer the following:	<b>\$26</b>

- Yes  No *My coop/run will be in the same location as was allowed by my original permit.*  
If you answered "No", you must provide us with a new plot plan for review – please attach it to this application and include the items bulleted above under "Plot Plan".
- Yes  No *The size of my coop/run has not changed since last year.*  
**ATTACH A PHOTO OF THE COOP/RUN IN PLACE. SHOW DIMENSIONS.**
- Yes  No *I have not received any notice from the State of Wisconsin or the City of Janesville revoking my license or permit. A valid registration number is required for permit renewal.*
- Yes *I have attached a copy of my registration card from the Wisconsin Department of Agriculture, Trade and Consumer Protection. The expiration date on the card is: \_\_\_\_\_*
- Yes *I have enclosed a payment with this application. Please make checks payable to the City of Janesville. **\*\*\*INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED.***

I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit, understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all of the above information and attachments are accurate. By submitting this application, I attest to reading the "cautionary statement" regarding owners obtaining building permits.

X \_\_\_\_\_  
 Property Owner Signature Date

Permit Issued by:  
 Date  
 Certification:

**For Tenant Applications Only - Property Owner to sign**

**WISCONSIN NOTARY ACKNOWLEDGEMENT (INDIVIDUAL)**

State of Wisconsin  
 County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ (Date) by \_\_\_\_\_

Name(s) of Person(s): \_\_\_\_\_

(Seal, if any)

\_\_\_\_\_  
 Signature of Notarial Officer

My Commission Expires: \_\_\_\_\_