## **Town of Harmony**

## **Rock County**

## **Application for Chicken Permit**

Read and initial each item, then sign and print your name and fill in your address.

I have read the ordina	nce on the ke	eping of chickens in rural
residential areas and	understand m	y responsibilities.
I have completed the	Wisconsin De	partment of
Agriculture, Trade and	d Consumer Pr	otection
"Livestock Premises I	Registration A	pplication" my
registration number is	<b>3</b>	and is
valid through		
Complete the following		
Application Date:	Number of	f Chickens to be kept:
Applicants Name:		
Street Address where chicken	ns will be house	ed:
City	State	Zip
Phone Number:		
Applicants Signature:		Date
Approved by		
Town Clerk Signature:		Date

Applications will be approved upon final inspection of coop and pen.