CHICKEN PERMIT APPLICATION

This application includes three sections:

1. First part: Chicken Permit Application
2. Second part: Chicken Coop Site Plan
3. Third part: Section 7.1.17 – Regulation of Chickens

Please complete the first two parts and return to Town Hall.

*Note the property owner's signature(s) must be notarized.*

The enclosed section of the Town Code is for you to read, understand and keep for your records.

Please call Town Hall at (262) 377-8500 if you have any questions.
Town of Grafton
Application for the Keeping or Maintaining of Chickens

Date: 

Property Owner(s) Name(s): 

Address: 

Mailing Address: 

Home Phone Number: Cell Phone Number: 

Number of Chickens: 

State of Wisconsin ) ) ss.
County of Ozaukee )

The undersigned, being first duly sworn on oath, deposes and says that he/she is the homeowner named in the foregoing application and that he/she has read and understands the attached section of the Town Code, Section 7.1.17, and agrees to be bound thereby.

Property Owner's Signature

Date

Property Owner's Signature

Date

Subscribed and sworn to before me this _____ day of ______________, 20__

Notary Public, State of Wisconsin
My Commission Expires: 

Office Use:

Date Application Received: 
Attachments:
   _____ Landlord's Approval, if applicable
   _____ List of Abutting Property Owners

Fee Received: ($____) Cash ___ Check Number: ______

Signature of Treasurer/Designee

Date

Page 1 of 2
Town of Grafton
Application for the Keeping or Maintaining of Chickens (cont’d)

I, ________________________________________, certify that I personally notified all abutting property
owners listed below of my intent to keep and maintain __________ (number) of chickens at my property
located at _________________________________________ in the Town of Grafton.  I know the signers
are abutting property owners.  I know their respective residences given.  I am aware that falsifying this
document will result in revocation of my permit.

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Plan Commission 1st Appearance Date: _________________________
Plan Commission Approval Date: _____________________________
Signature: ___________________________________________ Date: __________
Name (print): ___________________________ Phone: ______________
Address: _____________________________ Number of Hens: _______
Email Address: _______________________

1. Total square feet of coop and enclosure: __________
2. Square feet of coop alone: __________
3. Distance of enclosure to nearest habitable structure on adjoining properties: __________

Please use the area below to sketch the chicken keeping site. Include distances from lot lines, structures (garage, shed), fences/barriers, pools, etc. Identify neighbors whose property lines connect to your property, including diagonals, as well as any neighbor across the alley, but not across the street. **You must also attach a separate image depicting the design of the coop and enclosure, along with any associated dimensions for Plan Commission review and approval.**

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Plan Commission 1st Appearance Date: __________________________
Plan Commission Approval Date: __________________________
Issue Date: ______________ Permit Number: _______ Fee: _______
Clerk: ___________________________