Department of Public Health

Dottie-Kay Bowersox, MSA Public Health Administrator 730 Washington Avenue Racine, Wisconsin 53403 262-636-9201 262-636-9165 FAX



Website: www.cityofracine.org/Health@cityofracine.org/
Email: publichealth@cityofracine.org/Health@cityofracine.org/

Environmental Health Division 262-636-9203 Community Health Division 262-636-9431

Laboratory Division 262-636-9571

APPLICATION FOR URBAN CHICKENS PERMIT

Pursuant to Municipal Code Chapter 10

PRINT CLEARLY AND ANSWER ALL QUESTIONS

Return Application with Payment to the City of Racine Department of Customer Service 730 Washington Ave, Room 103, Racine, WI 53403 – Make Checks Payable to "CITY OF RACINE"

NAME	TAX PAI	RCEL NUMBER		
MAILING ADDRESS	CITY, STATI	E, ZIP CODE		
PROJECT SITE ADDRESS	CITY, STATI	E, ZIP CODE		
PHONE NUMBER	FAX NUMBER			
EMAIL ADDRESS				
Registration number from your Wisconsin Department of Agriculture, Trade and Consumer Protection "Livestock Premises Application". (https://wiid.org/premises-registration-renewal/)		REGISTRATIO	DN #	
Do you have a copy of the City of Racine Chicken Ordinance?		☐ YES	□ NO	
Have you been previously permitted/licensed for chickens?		☐ YES	□ NO	
How many animals do you currently have at your residential proper		erty?	#:	
Number of proposed hen(s).			#:	
Are your oldest hen(s) eight (8) weeks of age or o	older?	☐ YES	□ NO	
How will you dispose of the chicken waste?				
Do you own the parcel?		☐ YES	□ NO*	
*If NO, you must present a signed statement a application and keeping chickens on the prem	•	owner, conse	enting to this	
Do you live in a single-family residential dwelling?)	☐ YES	□ NO	
Will you utilize an accessory structure that already property as a hen house or chicken pen?	y exists on the	☐ YES	□ NO	
 On a separate sheet of paper, provide a detailed description and design sketch of the hen house(s) and chicken pen(s) with dimensions and the precise location in relation to property lines, adjacent properties, and your principal structure. Also indicate if the enclosures you will utilize are existing, accessory structures and/or chicken tractors. Attach all documentation and/or photos to this permit application. 				

Owner/Occupier acting as General Contractor (<u>MUST SIGN CAUTIONARY STATEMENT</u>). Per Wisconsin Stat. § SPS 320.09(9)(a)3. An owner/occupier of a 1 or 2-family home or a Wisconsin Licensed Contractor can apply for permits.

General	Contractor	Information	(If Applicable):

CONTACT NAME (AND COMPANY IF A	PPLICABLE)				
MAILING ADDRESS	ILING ADDRESS CITY, STATE, ZIP CODE				
PHONE NUMBER		FAX NUMBER			
EMAIL ADDRESS					
Dwelling Contractor Quantum 1 and 2-family dwellings	alifier Lics).	S copy of both their Dwelling Contractor License and cense attached to this application (Only required for			
☐ Construction drawings Estimated Cost of Project: \$		Square Footage of Project:			
•		PERMITS MAY RESULT IN DOUBLE PERMIT FEES.			
		e valid for a period of eighteen (18) months from date of			
shown on the attached Cons	truction P	cation for this permit to do the work herein described and Plans, Site Survey, and herby agrees that all work will be o and ordinances of the State of Wisconsin and the City of			
Owner/Contractor Signature		Print Name	Date		
Permit Fees:	\$55	Urban Chickens			
	<u>\$80</u>	Residential Accessory Structure Building Permit			
	\$135	Total – Make checks payable to "City of Racine"			

Remit \$135 with this application, all supplemental materials, and documentation to the City of Racine Department of Customer Service, City Hall Room 103, Racine, WI 53403.