

FEE PAID \_\_\_\_\_  
RECEIPT NO. \_\_\_\_\_  
ATF Y/N: \_\_\_\_\_  
REGISTRATION NO. \_\_\_\_\_

DATE STAMP

Waukesha County Department of Parks and Land Use  
Planning and Zoning Division  
515 W. Moreland Blvd. Room AC230  
Waukesha, WI 53188  
Phone 262.896.8300 Fax 262.896.8071  
Email [pod@waukeshacounty.gov](mailto:pod@waukeshacounty.gov)  
Website [www.waukeshacounty.gov/planningandzoning](http://www.waukeshacounty.gov/planningandzoning)

## Registration Form for Recreational Chickens

*Waukesha County regulations and BMPs regarding the keeping of recreational chickens are located [here](#) for lots between one and three acres.*

Tax Key Number and Lot Size: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address where chickens are kept (if different than mailing address): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Number of chickens you are keeping: \_\_\_\_\_

Limit is five (5) chickens per lot (one acre minimum lot size)

Size of coop and coop/pen location: \_\_\_\_\_

(e.g., wooden coop with fenced backyard in SW corner of lot, etc. Attach survey/site plan and sketch.)

DATCP Livestock Premises Registration Number: \_\_\_\_\_

Explain how manure will be disposed of/removed from site: \_\_\_\_\_

If the applicant is not the owner of the property, the applicant must obtain the owner's signature below. By signing this application, the applicant attests to having read, understood, and agrees to the requirements of the Ordinance and affirms that all submitted information is true and correct and that all applicable federal, state, county, and town ordinances and codes will be complied with. This registration is non-transferable. The applicant understands and agrees to not allow their chickens to become a nuisance or burden on the community or neighbors which violates this or other applicable ordinances. Failure to comply with the provisions of this or related ordinances shall result in fees, fines, penalties, and possible revocation in accordance to law. The applicant further understands that the Zoning Administrator may revoke this registration if the property is found to be in violation of the Zoning Ordinance or any ordinance regarding the keeping of recreational chickens. Failure to register and pay the required fee will result in forfeiture, including doubling of the registration fee. By signing this form, the owner is giving their consent for the Dept. of Parks and Land Use to inspect the site as necessary and related to this application even if the property has been posted against trespassing pursuant to Wis. Stat.

\_\_\_\_\_  
*Signature of Property Owner*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Zoning Administrator*

\_\_\_\_\_  
*Date*

Please sign and return this form to the Waukesha County Planning and Zoning Division with the **required fee, survey/site plan, sketch, manure management plan, and DATCP registration number**. A copy of your approved registration will be signed and returned to the mail or email address provided above. If you have any questions regarding this form, please contact the Planner of the Day at 262.896.8300 or at [pod@waukeshacounty.gov](mailto:pod@waukeshacounty.gov).