

Village of Oxford
129 S. Franklin Ave.
P.O. Box 122
Oxford, WI 53952
(608)586-4488

Fee: \$50.00
Date: _____



APPLICATION FOR KEEPING CHICKENS
(Fees are non-refundable and due upon filing)

Date of Application: _____

The undersigned requests permission to keep chickens in the Village of Oxford.

1. Name of Applicant: _____

2. Address of Applicant: Property Owner Tenant

Phone number of Applicant: _____

3. Zoning District: _____ (Permit is only allowed in R1, R2, R3)

4. Number of Chickens to be kept: (cannot exceed 4) _____

5. Accurate description of coop. Coop may be part of unattached yard shed or garage provided setback requirements are met but may not be on top of a building. Attach a sketch plan to the application indicating the location of the coop, along with any associated fencing, all dimensions, and the setbacks from the applicable lines. Photos may be submitted in addition to the sketch.

6. Coop Size: Length _____ Width _____ Square Footage _____

7. Size of Run attached or surrounding the coop: _____

8. Distance of Coop/Run to lot lines: _____ feet to closet side lot line _____ feet to rear lot line. *(All permanent and (mobile) coops shall comply with the building and zoning requirements of this Code, except the limitations on the number of accessory structures, and no coop shall be placed in the front or side yard).*

WHEREAS, the undersigned applicant hereby states that the foregoing information and all attachments to this application are true and correct.

Applicant Signature _____ Date _____

TO BE COMPLETED IF APPLICANT IS NOT THE OWNER OF THE PROPERTY:

I am the property owner of the address listed on this application and hereby consent permission to my tenant to keep chickens on my property.

Property Owner Signature _____ Date _____

Office Use Only: Public Works Director – Approved: _____ Not Approved: _____ Date: _____

Office Use Only: Police Chief – Approved: _____ Not Approved: _____ Date: _____