License Fee: _____

Invoice No.: _____

PAID

RECEIVED
MAY 26 2026

## APPLICATION TO OWN, KEEP AND/OR HARBOR CHICKENS IN THE CITY OF LA CROSSE

License Period: January 1, ____ to December 31, ____

Use Conditions:

- One property is limited to the keeping or harboring of up to eight (8) chickens.
- A person may only own, keep or harbor chickens on property be ing used as a one-family dwelling (single family) or two-family dwelling (duplex).
- No person shall keep any rooster.
- No person shall slaughter any chickens.
- Chickens shall be provided with a covered enclosure that measures a minimum of three (3) square feet per bird, and all chickens must be kept in the covered enclosure or a fenced enclosure within the backyard of the property at all times.
- No enclosure shall be located closer than 25 feet to any residential structure on an adjacent lot.

**APPLICANT:**

Susana Rodriguez

**PROPERTY ADDRESS WHERE CHICKENS WILL BE KEPT:**

2555 16th St S La Crosse WI 54601

**PROPERTY OWNER(S):**

Susana Rodriguez

*If applicant is not the owner, please provide written documentation from the owner that they have been notified. Not applicable for renewal.*

**Is the property _____ ONE-FAMILY dwelling or _____ TWO-FAMILY dwelling? (Check One)**
*If duplex, provide written documentation from other occupant that they have been notified. Not applicable for renewal.*

***Attach a scale drawing showing property lot lines, dimensions of coop/enclosure and distance from adjoining lot lines and residential structures.***

*Applying for and obtaining this chicken permit **DOES NOT** provide any authority to violate any restrictive covenants that govern the property where you reside or intend to keep chickens. Please review any Declaration of Restrictions or Restrictive Covenants that apply to the property prior to applying for a chicken permit. No permit fees will be refunded once they are paid.*

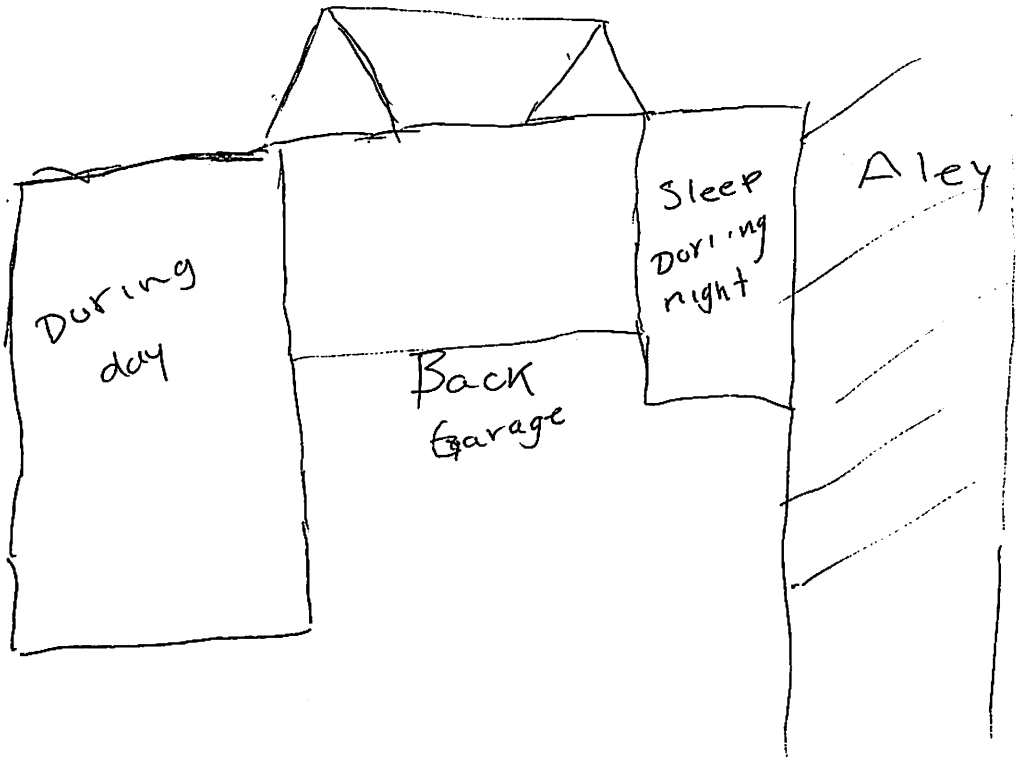
I hereby certify that I have read and understand the content of this application and that the above statements are true and correct to the best of my knowledge. I further certify that I understand that any such license is subject to revocation in accordance with Municipal Code of Ordinances Sec. 6-16.

_____
(signature)

_____
(signature)

_____ _____ may 26 -2026
(telephone) (date)

Sec. 6-16 of the La Crosse Municipal Code
Rev. 12/2023


During
day
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