



\$10

VILLAGE OF SPARTA CHICKEN PERMIT RENEWAL

Visit our website at www.spartami.org

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zipcode: _____

Phone Number(s): _____ E-mail: _____

- I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.
- Additionally, I hereby grant permission for the Village of Sparta Village Manager, or his/her designee, to enter upon the above-mentioned property (or as described in the attachment) for the purposes of gathering information related to this application.
- Furthermore, I hereby acknowledge that in review of this application, the Village of Sparta may require the services of the Village Planner, Village Engineer, and/or the Village Attorney to ensure that the requested item(s) for review in this application is compliant to the current zoning laws and policies of the Village of Sparta. I, as the applicant, acknowledge that any costs incurred by the Village of Sparta as they relate to the review of this application by any of the Village's consultants listed above are my responsibility to reimburse and agree to repay the Village of Sparta for any and all costs incurred to it in the review of this application.

Signature: _____ **Date:** _____

Applicant is the: Owner Lessee

Property Owner's Name (if different from applicant): _____

Street Address: _____

City: _____ State: _____ Zipcode: _____

Phone Number(s): _____ E-mail: _____

If the applicant is not the owner of the real property on which he or she wants to keep chickens, the applicant must provide the written consent of the owner of the real property. Without such written consent, the permit application will not be granted. Written consent must be attached to this permit application.

Has anything changed from the original Chicken Permit? Yes (if so, what has changed?) No

TO BE COMPLETED BY VILLAGE

Date application and fee received: _____ Staff Initials: _____ Receipt #: _____

Application is: APPROVED DENIED Expires on: _____

Explanation: _____

Village Manager: _____ **Date:** _____
(or his/her designee)