

City of Wisconsin Dells

Application for: LIVESTOCK/POULTRY LICENSE

Date: _____

FEE \$3.00 per animal

Receipt No. _____

Name of Applicant: _____

Address of Applicant: _____

Name of Business: _____

Address of Business: _____

Daytime Telephone Number: (____) _____ Cell Phone: _____

Number and type of livestock or poultry to be kept: _____

Information on where livestock/poultry will be kept and maintained: _____

Printed Name of Applicant

Signature of Applicant

Subject to compliance with Wisconsin Dells Municipal Code sec. 16.02

Licensing period runs July 1st through June 30th of each year.

Date Approved: _____ day of _____ 20____

Date Denied: _____ Reason(s): _____