



**City of Harrisburg
Building Services**

301 E Willow St. Harrisburg, SD 57032
Phone: 767-5010 Fax: 743-2831

**APPLICATION
TO KEEP
CHICKENS**

Applicant name: _____ Date: _____

Applicant home address: _____

Applicant mailing address: _____
(If different than home address.)

Applicant e-mail address: _____ Phone: _____

Number of chickens to be kept: _____

This Application form must be accompanied by a site plan of the Applicant's property showing the location and dimensions of the proposed chicken coop.

I hereby certify that the above information is accurate and correct. I agree to abide by the City's criteria to keep chickens.

Applicant's signature

FOR CITY USE ONLY

Date received: _____ Date & Time of Site Visit: _____

Date of Planning Commission Review: _____