## Town of Buchanan Firearm Discharge Permit

N178 County Road N • Appleton, WI 54915 • Phone (920) 734-8599 • Fax (920) 734-9733 • www.townofbuchanan.org

## § 420-7. Discharging and carrying firearms and guns.

No person, except a sheriff, police officer or their deputies, shall fire or discharge any firearm, rifle, spring or air gun of any description within the Town west of Loderbauer Road, or have any firearm, rifle, spring or air gun in his possession or under his control, unless it is unloaded and knocked down or enclosed within a carrying case or other suitable container; provided, however, that his section shall not prevent the maintenance and use of duly supervised rifle or pistol ranges or shooting galleries authorized by the Town Board. This section shall be deemed to prohibit hunting within the Town west of Loderbauer Road, provided that the Town Administrator and/or Clerk may issue written permits to owners or occupants of private premises to hunt or shoot on such premises, if he/she finds such privileges necessary for the protection of life or property, and subject to such safeguards as he/she may impose for the safety of the lives and property of other persons within the Town. The Town Clerk may impose such other safeguards as deemed necessary for the safety of the lives and property of other persons within the Town.

Applicant Legal First Name:	Applicant Legal Last Name:
Legal M.I.: Date of Birth:	Address:
Phone Number:	
Information of guests (Limit of two gu	uests per permit; same information needed as above):
	n will occur:
Parcel #:	
Do you own this private property?	
	n for use of the property must be provided by the owner before a permit will be issued).
Purpose for which permit is requested	d (be specific):
The applicant has agreed to provide all neces	sary safeguards for the safety of the lives and property in the Town of Buchanan.
	omply with all State of Wisconsin and Department of Natural Resources licensing
	Town of Buchanan Municipal Codes. Please be advised that Outagamie County
Sheriff's Deputies serving the Town of Buchan	ian will be provided a copy of this permit.
Applicant Signature	Application Date
This permit is valid from	through
Town Clerk Signature	Date Approved
<b>0</b> ***	P. C. P. C. C.
	For Office Use Only
☐ Permit application reviewed by B	uchanan Deputy.
☐ Approved/Denied permit provide	ed to Buchanan Deputies.
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