

Fee - \$25.00

Date \_\_\_\_\_

Receipt # \_\_\_\_\_

License # \_\_\_\_\_

## KENNEL / CATTERY LICENSE APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Kennel Address \_\_\_\_\_

SS# \_\_\_\_\_

Breed of Dogs / Cats \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of Dogs / Cats \_\_\_\_\_

List the City Dog / Cat Tag # of each animal:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of years in business: \_\_\_\_\_

I, \_\_\_\_\_, understand that if I house more than twenty (20) dogs or cats, or if more than two (2) litters are produced in the calendar year dating July 1st thru June 30th, I will obtain a State License from the Kansas Animal Health Department. I will also contact the City Clerk's Office (276-1100) to update the above information as more animals are taken in. Failure to do so will result in the revocation of the Kennel License. (K.S.A. 47-1701)

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

Your license expires: \_\_\_\_\_