Kennel License Application Form

Business Name	Date of Application (D/M/Y)

Kennel Type	New License	Renewal
Breeding: ☐ Boarding: ☐	☐	☐

Applicant Information	
Applicant Name:	
Mailing Address	
Phone Number:	
Alternate Phone Number:	
Email:	

New Kennels - Information to include with Application
☐ Current Zoning on Property
☐ Site Plan
☐ Building Department Approval

New Breeding Kennels and Renewals
☐ Complete list off all dogs on the premises stating the following: Name, breed, age and sex.
☐ Current veterinary records for all dogs on the premises listing the following: • Vaccinations are up to date.   • Dogs/puppies are in good health.   • How many times a female dog was bred and how many litters of puppies.

Boarding Kennels
☐ Provide records for any dog that permanently lives on the property.
☐ Provide identification and health records upon request for any dogs that use the facility (name, Rabies, Distemper/Parvo and Bordetella vaccinations).

By signing here, I have read and understand the information contained in this application. I declare that the information given in this application is correct and acknowledge that any false information could result in the revocation of the license, if granted. Further, I will abide by all of the provisions of the Municipality of Brockton Dog Control By-Law 2020-082 and amendments thereto and any other applicable municipal regulations that may apply to the operation of a Kennel.

Personal information contained in this form is collected under the authority of the *Municipal Act, 2001, Chapter 25*, as amended, and will only be used for the purpose for which it was collected. Questions about the collection of this information may be made to the Building/By-Law Department, 100 Scott St Walkerton, Ontario N0G 2V0 or by phone: 519-881-2223 ext. 141.

Signature: _____   _____
                              Applicant Signature   Date

Kennel License Application Form

List of Dogs

	Name	Breed	Age	Sex
1				
2				
3				
4				
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