



Kennel Permit Application Breeder/Recreational

☐ New Licence ☐ Renewal

Kennel Business Name: _____

Business Owner: _____

Business Address: _____

Phone: _____ Cell: _____ Email: _____

Number of Animals to be registered with The City of Quinte West: _____

Expiry Date: _____

Issue Date: _____

Refusal Date: _____

Revocation Date: _____

I hereby allow, at any reasonable time, an animal control officer or other authorized employee or agent of the City to inspect the property, other than any room or place used as a dwelling, to determine whether all requirements of this by-law are being complied with.

Applicant Signature

Date of Signature

OFFICE USE ONLY	
INSPECTIONS REQUIRED	APPROVED BY
BUILDING DEPARTMENT <ul style="list-style-type: none">• Zoning	
FIRE DEPARTMENT	
HEALTH UNIT	
HUMANE SOCIETY	
PROPERTY STANDARDS <ul style="list-style-type: none">• Clean and Sanitary	
ANIMAL CONTROL <ul style="list-style-type: none">• DOLA Convictions• By-Law Convictions	

*This form contains information collected and maintained specifically for the purpose of creating a record available to the general public and may be inspected by any person at the Clerk's Office at a time when the office is open.
Subsection 88(5).*

**To be renewed no later than December 31 every calendar year by submitting payment to the
Licencing Office with application.**