



# The Corporation of the Township of Chatsworth

## Kennel License Application Form

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

Applicant Information:	
Applicant Name:	
Phone Number:	
Fax Number:	
Mailing Address:	
Civic Address:	
Current Zoning on Property:	

Dog Information:	
New Application Yes ____ No ____ *If new application, please include a site map of the property that includes <b>all</b> buildings, dog runs, pens, etc.	Renewal Application Yes ____ No ____ Date of Last Inspection: _____
Type of Kennel:	Boarding Kennel _____ Breeding Kennel _____ Personal Use _____
Number of Dogs Total:	
Number of Dogs Not Used for Breeding:	
CKC Registration Info. (If Applicable)	

I have read and agree to comply with all terms and conditions of the Dog Control By-Law 2019-32.

I am familiar with the provisions of the Canadian Kennel Operations and/or Code of Practice, Canadian Veterinary Medical Association, and swear my operation meets the guidelines stated therein.

By signing here, I make application and approve the Animal Control Officer conducting an inspection of my Kennel Premises at the above location.

Signature: .....  
Applicant Signature
Date