CITY OF MINNETRISTA

7701 County Road 110 W Minnetrista, MN 55364



KENNEL LICENSE APPLICATION LICENSE EXPIRES

(952) 446-1660			
DATE	NNETRISTA		Renewal
SITE ADDRESS		PID	
OWNER Name / Address / City / State / Zip			
BUSINESS NAME - PHONE - EMAIL - F	EAV		
BUSINESS NAME - FHONE - EMAIL - F	-AA		
BUSINESS DAYS/HOURS:			
		a delay or denial of your Number	kennel license.
TYPE OF LICENSE		CURRENT CONDITION	AL USE PERMIT (CUP)
 □ Commercial (Boarding and breeding OR selling dogs for a profit.) □ Hobby (Own more than four dogs over six months of age.) 		 □ Yes. I have a current CUP in effect. □ No. I do not have a current CUP in effect. Please send me a land use application. 	
Total number of dogs on pro	premises (list type)		
Number of done accord (DI			
Number of dogs <i>owned</i> (Plot)	ease list city dog tag #s) 3)	5)	7)
•	4)	5) 6)	8)
PLEASE DESCRIBE THE PROPOSED	HOUSING AND CARE OF TH		
Signature of this application by the legal prop City Administrator or designee and the City of inspections as necessary during the licensing	f Minnetrista Code Enforcement C	Officer or designee to enter upo	n the property to perform
I hereby acknowledge that I have read this ap agree that the kennel will be operated and ma Minnesota. Failure to comply with conditions Minnesota may result in the revocation of the	aintained in accordance with all or of my Conditional Use Permit, or	dinances of the City of Minnetr	rista and the laws of the State of
SIGNATURE:			DATE:
PRINTED NAME:			