

# CLERKS DEPARTMENT KENNEL AND DOGGIE DAYCARE LICENCE

FORM-CLK-101



2585 King Road  
King City, ON L7B 1A1  
(905) 833-5321

## APPLICATION PROCESS

Please complete this application and provide all required supporting documentation. You will be contacted by an Animal Control Officer to arrange for the required site inspection. If you require further information, please refer to By-law Number 2012-175 available on our website ([www.king.ca](http://www.king.ca)), or contact the Clerks Department at **(905) 833-5321**.

**2020 Fees: New Licences \$161.00**

**Renewal Licences: \$85.50 (tax exempt)**

**Kennel**      **New:**   
**Renewal:**

**Doggie Daycare**      **New:**   
**Renewal:**

## PROPERTY INFORMATION

<b>Owner Name(s):</b>	
<b>Municipal Address:</b>	
<b>Legal Description: (Lot/Concession/Plan)</b>	
<b>Assessment Roll Number:</b>	
<b>Mailing Address: (If different than municipal address)</b>	
<b>Telephone Number:</b>	
<b>Cell Number:</b>	
<b>Contact Email / Fax No.:</b>	
<b>Property Zoning:</b>	
<b>Size of Property:</b>	<b>Acreage:</b> _____ <b>Frontage:</b> _____ <b>Depth:</b> _____

## KENNEL / DOGGIE DAYCARE INFORMATION

<b>Kennel / Daycare Name:</b>	
<b>Breed of Dog(s):</b>	
<b>Type of Kennel: (Check all that apply)</b>	<input type="checkbox"/> <b>Boarding</b> <input type="checkbox"/> <b>Breeding</b> <input type="checkbox"/> <b>Training</b>
<b>Operator's Name:</b>	
<b>Telephone Number:</b>	
<b>Cell Number:</b>	
<b>Contact Email:</b>	

## ADDITIONAL DETAILS

## TERMS AND CONDITIONS

By submitting this application, the applicant agrees to abide by the following terms and conditions:

1. Annual site inspection of facility.
2. Provision of proof of insurance.
3. A site plan drawing must be included with all new applications or changes to an existing facility. A site plan drawing is not required with a renewal application. Please ensure that all applicable requirements from the following list are indicated on the provided drawing(s).
 

<ol style="list-style-type: none"> <li>1. <i>Site Plan including lot information</i></li> <li>2. <i>Building dimensions</i></li> <li>3. <i>Kennel location</i></li> <li>4. <i>Setbacks from property lines</i></li> <li>5. <i>Setbacks from buildings on adjacent lots</i></li> <li>6. <i>Street Frontage</i></li> </ol>	<ol style="list-style-type: none"> <li>7. <i>Structural details</i></li> <li>8. <i>Type of fencing</i></li> <li>9. <i>Number of dogs to be kept at any time</i></li> <li>10. <i>Kennel / Doggie Daycare information</i></li> <li>11. <i>Dogs outside run</i></li> <li>12. <i>Dogs inside area</i></li> </ol>
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## DECLARATION

I hereby certify that the information given in this application is true and correct, that I have not been convicted under the Criminal Code of Canada for animal abuse, that I can provide the necessary proof of insurance, and that I agree to abide by the provisions of all applicable Municipal By-laws and Provincial and Federal Statutes. I understand that my kennel / doggie daycare may be inspected by a By-law Officer, or person(s) authorized to ensure compliance with the applicable rules/legislation, and I consent to such inspections.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

*Personal information (PI) is collected on this form under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the Kennel / Doggie Daycare Licence. The personal information provided on this form is protected in accordance with Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) Part II. Should you have any questions or concerns regarding the collection of personal information (PI), please contact the Clerks Department, King Township, 2585 King Road, King City, L7B1A1 (905) 833-5321.*

**FOR OFFICE USE ONLY:**

		<input type="checkbox"/> RENEWAL	<input type="checkbox"/> NON-CONFORMING	
<b>Inspection Sheet and Site Plan Drawing are Attached:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<b>Kennel / Doggie Daycare Permitted:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Other	
<b>Proof of Insurance Attached:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<b>Licence Fee Paid: \$</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<b>Date Paid:</b>	<b>Receipt No:</b>			
<b>Approved By:</b>			<b>Date:</b>	
<b>Licence Issued:</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>LICENCE NUMBER ISSUED:</b> _____				
<b>Comments:</b>				