



KENNEL LICENCE

under By-Law #2008-111

1. OWNER

Name _____

Mailing Address _____

Lot _____ Concession _____ 911 Address _____

Telephone Number (_____) _____ Email: _____

2. NAME OF KENNEL _____

3. CHECK APPROPRIATE BOX

NEW APPLICATION

RENEWAL

PREVIOUS LICENCE NUMBER: _____

4. FEE - \$250.00 on or before March 31 (\$125.00 for seniors 65+)
- \$300.00 after March 31

I, _____ hereby declare that the above information is correct, that I have read and understood the provisions contained in Section 2 of By-Law #2008-111 of the Town of New Tecumseth and agree to abide by these and any other applicable by-laws pertaining to Kennels.

Signature

Date

I have ceased operation of a kennel on my property effective _____, 20____.

Signature

Personal information is being collected under the authority of the Municipal Act 2001, Chapter 25, as amended and Police Services Act RS01990, 20 as amended and will be used by the Town of New Tecumseth to process this application for administration of this licence and to ensure I comply with all applicable statutes, regulations and by-laws. Questions regarding the collection of this information should be directed to the Clerk/Director of Administration Services, Town of New Tecumseth, 10 Wellington St. East, Alliston, Ontario, L9R 1A1, Telephone: 705-435-3900/905-729-0057, email: clerk@newtecumseth.ca