



**APPLICATION FOR COMMERCIAL
ANIMAL ESTABLISHMENT CITY LICENSE**
City of Clinton, 611 South 3rd Street, P.O. Box 2958, Clinton, IA 52733-2958
(563) 242-2144

License # _____
Date Issued: _____

SECTION I – NAME & ADDRESS

Name of Applicant

Home & Mailing Address City State Zip

Phone# Email (*required – all permits will be emailed*)

I do hereby make application for the following City License (*check all that apply*):

<input type="checkbox"/>	<u>Type of License</u>	<u>Must Comply with City Code Chapter</u>	<u>Fee</u>	<u>Fee After July 1st</u>	<u>Insurance Required</u>	<u>Expiration Date</u>
	Animal Shelter	91	\$150.00	\$75.00	No	Dec. 31
	Kennel	91	1-9 animals: \$150.00 10-50 animals: \$200.00 50+ animals: \$300.00	1-9 animals: \$75.00 10-50 animals: \$100.00 50+ animals: \$150.00	No	Dec. 31
	Pet Shop	91	\$75.00	\$37.50	No	Dec. 31
	Riding Stable	91	\$75.00	\$37.50	No	Dec. 31
	Animal Auction	91	\$50.00	\$25.00	No	Dec. 31
	Zoological Park	91	\$100.00	\$50.00	No	Dec. 31
	Circus, Carnival, Performing Exhibition	91	\$50.00	\$25.00	\$1M	Dec. 31
	Grooming Shop	91	\$50.00	\$25.00	No	Dec. 31
	Breeding Permit	91	\$50.00 per litter	N/A	No	1 year from issuance

**NOTE: All licenses must be approved by the City Council.*

SECTION II – BUSINESS & SALES INFORMATION

Name/Title of Business

Business Address City State Zip

Iowa Department of Agriculture License Number/s (**required**)

Start Date (*carnival only*)

Duration of Sale (*carnival only*)



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SECTION III – PRIOR LICENSE REVOCATION

Has a similar license from the City of Clinton or any other jurisdiction been revoked? If yes, why:

SECTION IV – ANIMAL WELFARE VIOLATIONS

Have you or any of your employees ever been convicted of an Animal Welfare violation pursuant to City Code Chapter 91 or State Code? If yes, why:

SECTION V – RELEASE AND DISCLOSURE

I _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Clinton, Iowa, whether said records are of a public, private or confidential nature, including criminal histories.

I hereby swear and affirm that each that each statement and all information in or supplementing this application is complete and true and accurately recorded to the best of my knowledge. I understand that providing false, misleading and/or incomplete information on this application will result in my not obtaining a Commercial Animal Establishment City License in the City of Clinton, Iowa.

Signature of Applicant

Date



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SECTION VI – CHECKLIST FOR APPLICANT

<input type="checkbox"/>	City Application Completed? Completed application can be emailed to: clerk@cityofclintoniowa.gov
<input type="checkbox"/>	Inspection completed by Clinton Fire Department Building Safety Division? (563-244-3360) (if required)?
<input type="checkbox"/>	Investigation completed by Police Department?
<input type="checkbox"/>	All fees paid to City Finance Department or on the City's website? Veterinary hospitals are exempt from fees.
<input type="checkbox"/>	License application scheduled for Council approval?
<input type="checkbox"/>	Kennels: all dogs and cats within the kennel must have an individual City license and proof of rabies vaccination.

***All items must be completed and submitted to the City Clerk's office before the application
can be forwarded to the Council for approval.***

Applications are to be submitted 30 days prior to the expiration date.

SECTION VII – OFFICE USE ONLY

License#	Fee Paid to Finance Office/Online	Approved by Fire Department	Approved by PD	Approved by Council