



Please submit this form to:
City of Abilene
419 N Broadway
Abilene, KS 67410
785-263-2550
shayla@abilenecityhall.com

For office use only:
Licensing Year: _____
License No. : _____
NEW: _____ RENEWAL: _____

APPLICATION FOR KENNEL LICENSE

KENNEL LICENSE FEE - \$25.00

COMPANY NAME

COMPANY ADDRESS (Street) (City) (State) (Zip)

MAILING ADDRESS (Street) (City) (State) (Zip)

COMPANY PHONE (Fax Number) (Cell Phone Number)

OWNER'S NAME (Owner's Phone Number)

OWNER'S ADDRESS (Street) (City) (State) (Zip)

MANAGER, IF DIFFERENT FROM OWNER

LEGAL DESCRIPTION OF COMPANY ADDRESS

NUMBER OF DOGS

NUMBER OF CATS

I agree to comply with all requirements of the City of Abilene Code and regulations relating to operating a kennel. I agree my license my be revoked or suspended if I am found to have violated such requirements or regulations or if I have misrepresented any facts in this application. I agree to give any duly authorized representative of the City of Abilene, Kansas free access to my premises for the purpose of inspection.

SIGNATURE OF OWNER: _____ DATE: _____

FOR OFFICE USE ONLY

Amount Paid \$ _____ Date _____ Receipt No. _____ Received by _____

ZONING CERTIFICATE

This is to certify that the above described property is zoned _____ and does/does not comply with the provisions of the zoning regulations of the City of Abilene for the proposed use.

APPROVED _____ **DISAPPROVED** _____

SIGNATURE OF ZONING OFFICIAL _____ **DATE:** _____

CERTIFICATE OF ANIMAL CONTROL OFFICER

This is to certify that the above described property has been inspected and is in compliance with all applicable laws of the City of Abilene and the State of Kansas.

APPROVED _____ **DISAPPROVED** _____

SIGNATURE OF ANIMAL CONTROL OFFICER _____ **DATE:** _____

CERTIFICATE OF CITY INSPECTOR

This is to certify that the above property has been inspected.

APPROVED _____ **DISAPPROVED** _____

SIGNATURE OF CITY INSPECTOR _____ **DATE:** _____

CERTIFICATE OF CITY CLERK

APPROVED _____ **DISAPPROVED** _____

SIGNATURE OF CITY CLERK _____ **DATE:** _____
