



# VILLAGE OF MOUNT PLEASANT

## Kennel License Application

1-Year License - Expires June 30th Each Year - License Fee is Non-Refundable & Not Prorated

Circle One:  New |  Renewal License Period: July 1, \_\_\_\_\_ to June 30, \_\_\_\_\_ Fee: \$100.00

I/WE HEREBY APPLY FOR A KENNEL LICENSE IN MOUNT PLEASANT FROM DATE HEREOF UNTIL THE EXPIRATION DATE OF JUNE 30TH OF EACH YEAR (UNLESS SOONER REVOKED) SUBJECT TO THE LIMITATIONS IMPOSED BY SECTION 10.3 OF THE MOUNT PLEASANT MUNICIPAL CODE, AND HEREBY AGREE TO COMPLY WITH ALL LAWS, RESOLUTIONS, ORDINANCES AND REGULATIONS AS IT RELATES TO THE OPERATION OF DOG KENNELS.

### APPLICANT INFORMATION: PLEASE PRINT

Legal Name of the Applicant: \_\_\_\_\_

Applicant Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant Contact/Phone \_\_\_\_\_ Applicant Email \_\_\_\_\_

### KENNEL INFORMATION: PLEASE PRINT

Trade Name of Business: \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Email \_\_\_\_\_

### PREMISES INSPECTED:

**Coordinator of Health Services** Approved  Denied  Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Additional Comments: \_\_\_\_\_

**Fire Inspector** Hold  Release  Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Additional Comments: \_\_\_\_\_

Certification: I hereby certify that the information on this application is complete, accurate, true and agree to comply with all state and local laws, ordinances and regulations.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

### FOR OFFICE USE ONLY

Return Completed Form & Payment to:

Mount Pleasant Village Clerk  
8811 Campus Drive  
Mount Pleasant, WI 53406

Questions:

Village Hall Main Line: 262-664-7800 Option 3  
Email: clerk@mtpleasantwi.gov

Village Board Recommends:

Approve: \_\_\_\_\_ Deny: \_\_\_\_\_

License Number \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date Received Stamp