

KEEPING OF CERTAIN DOMESTICATED ANIMALS
 Office of the City Clerk
 City of Robbinsdale
 915.37

PERMIT APPLICATION
 Annual Application Fee \$25
 + \$1.00 per address mailing to 200 feet
 Initial Investigation Fee \$50

I, _____, hereby make application for a permit to keep certain domesticated animals, subject to provisions of City Ordinances. I have received a copy of City Ordinance, Section 915 and submit the following information as required by such ordinance and by the City Council. I do hereby swear that the several answers and statements, and any attached information set forth by me in this application are true.

The City Ordinance requires that the data requested in this application must be submitted in order for the City to determine your eligibility for the license. Refusal to provide the data may result in an automatic denial of the requested license. The data provided shall be classified in accordance with the Minnesota Government Data Practices Act. The City Staff shall investigate the data provided. A recommendation for approval or denial, based upon the applicant's eligibility is determined by the provisions of the licensing ordinance and other applicable laws shall be forwarded to the City Council for final determination. Access to the data provided shall be by officials and employees of the City engaged in administering or monitoring the provisions of the licensing ordinance; and also as allowed for by the Minnesota Government Data Practices Act.

PLEASE PRINT OR TYPE YOUR RESPONSES
 (Provide in full the first, middle and last names where requested)

Applicant Name		Address	
City	State	Zip	Residence Phone No.
Drivers License No./State Issued		Date of Birth	
		Work Phone No.	

- 1) Address and phone number of property where animal(s) is/are to be kept (if different from above): _____

- 2) Species: _____ Sex: _____ Number of Animals: _____
- 3) Purpose for keeping of such animal(s): _____

- 4) Give a detailed statement on applicant's training in care and handling of such animal. _____

- 5) Describe the conditions provided (i.e. cage, pen, etc.) for the care and confinement of such animal(s). _____

- 6) Please attach a diagram showing the location of the confinement of your premises and the square footage of the confinement area. If the confinement is located outdoors, show also the distance from neighboring properties.
- 7) Describe the materials used to construct the animal confinement.

8) Describe any property damage or physical injury caused by such animal(s) in the past.

Witness

Signature of Applicant

Date: _____

Submit the application and the required fee to the City Clerk's Office, 4100 Lakeview Ave., Robbinsdale, MN 55422. Questions should be directed to the City Clerk's office at (763) 531-1255.

RECOMMENDATION OF DEPARTMENT HEADS (Initial your approval. Give reason for denial on separate memorandum, if necessary.)

	<u>APPROVE</u>	<u>CONDITIONS?</u>	<u>DENY/MEMO ATTACHED</u>
____ Building Official	_____	_____	_____
____ Code Enforcement	_____	_____	_____
____ City Planner	_____	_____	_____
____ Chief of Police	_____	_____	_____

Public Hearing Date: _____ Publication Date: _____

Date notices mailed to affected property owners: _____ (attach map of residences notified)

Council Action: Approved _____ Denied _____

Approval conditions or reasons for denial: _____
