



**DOG CONTROL**  
901 Port Ave  
St. Helens, Oregon 97051  
Phone: (503) 366-4614 Fax: (503) 366-3990

## **COLUMBIA COUNTY KENNEL LICENSE APPLICATION**

Kennel License applications must be fully completed. Submitted applications will be reviewed for completeness by Columbia County Sheriff Dog Control prior to conducting inspections. Inspections will be conducted based on the information provided in the application. License eligibility determinations will be made after complete applications are submitted, fees are paid and inspections are conducted. Kennel Licenses issued do not constitute any land use approval required for operation of the kennel at the property indicated below.

### **Please Complete the Following:**

KENNEL BUSINESS NAME (if any): \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Kennel Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

### Alternative/Emergency Kennel Contacts:

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Which of the following kennel activities will occur at the kennel during the course of the year? Check all that apply.

- Operating a non-profit animal rescue entity as defined under ORS 609.415 / ORD 2013-5**
- Holding animal for disposition by gift, treatment and care, euthanasia, sale or exchange.
- Care or custody of dogs for boarding, training or similar purposes, for varying periods of time for profit or compensation.
- Breeding, buying, selling or bartering of dogs for profit or compensation.
- Bathing, clipping, pedicures or grooming of dogs for profit or compensation.
- Buying or receiving dogs, and thereafter exhibiting or offering for sale, or selling, trading or bartering such animals.

Please provide the following information. Circle "Yes" or "No" and fill in blanks where appropriate.

**Animal rescue: Current number of animals?**

**Number of animals received last year?** \_\_\_\_\_

**Number of animals placed by the rescue last year?**

Is the rescue registered as a 501C-3 Non profit?

**Dog Kennels:**

Current number of dogs over 6 mos. of age kept at your kennel? \_\_\_\_\_

Maximum number of dogs over 6 mos. of age to be kept at your kennel? \_\_\_\_\_

Number of dogs sold, traded or exchanged last year?

Number of litters last year? \_\_\_\_\_

BY SIGNING AND SUBMITTING THIS APPLICATION, THE APPLICANT ACKNOWLEDGES AND AGREES TO COMPLY WITH THE TERMS OF THE COLUMBIA COUNTY KENNEL ORDINANCE NO. 2013-5. APPLICANT HEREBY AUTHORIZES INSPECTIONS IN ACCORDANCE WITH THE PROVISIONS OF SECTIONS 4 AND 7 OF THE COLUMBIA COUNTY KENNEL ORDINANCE.

ACCEPTANCE AND PROCESSING OF THIS KENNEL LICENSE APPLICATION DOES NOT CONSTITUTE THE ISSUANCE OF A KENNEL LICENSE BY COLUMBIA COUNTY. APPLICATIONS WILL BE PROCESSED BY COLUMBIA COUNTY STAFF AND, IF APPROVED, LICENSES WILL BE ISSUED AFTER KENNEL LICENSE FEES ARE PAID. SEPARATE LAND USE APPROVAL MAY BE REQUIRED. QUESTIONS MAY BE DIRECTED TO THE COLUMBIA COUNTY SHERIFF DOG CONTROL UNIT AT (503) 366-4614.

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

SPACE BELOW THIS LINE RESERVED FOR COLUMBIA COUNTY

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**APPROVED**

**DENIED**

Notes:

<p><u>LDS</u></p> <hr/> <p><input type="checkbox"/> Outright Permitted Zone; or</p> <p><input type="checkbox"/> Conditional Use Zone:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Conditional Use Approval Obtained</p> <p style="padding-left: 20px;"><input type="checkbox"/> Lacking Conditional Use Approval</p>
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