

Eureka Township



Private Kennel Operator License Application

OFFICE USE ONLY

Note: Completed application must be submitted to the Eureka Town Clerk by noon on the Thursday 10 days prior to the Planning Commission meeting.

License No.:

Annual Renewal Date:

Site Address	Property ID No. (PIN)
Contact Person	Daytime Phone

PROPERTY OWNER

Name	Daytime Phone		
Address	City	State	Zip

KENNEL DESCRIPTION

Width	Length	Height
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Type of construction materials

KENNEL LOCATION

1. Is a site plan showing the location of all dwellings within 500 feet of the proposed dog kennel attached to this application? *(Required for application to be complete.)* Yes No

2. List the addresses of all dwellings within 500 feet of the proposed kennel location:

(continued on next page)

I hereby certify that the information provided in this application is true, correct, and complete. I understand that acceptance of this application and fees does not constitute a valid license until final approval has been granted by Eureka Township. I understand that no private dog kennel shall be operated or maintained within the Township of Eureka unless the operator thereof shall first have applied for and obtained a kennel operator's license in conjunction with the Conditional Use Permit; that such license shall be issued for one year; and that the operator of a private kennel shall pay an annual license fee as set forth in Ordinance 7. I acknowledge that boarding of dogs is prohibited in the Agricultural District in Eureka Township. I agree that any private kennel licensed under this application shall be kept and maintained at all times in a clean and sanitary condition, and dogs kept therein shall be reasonably restrained from annoying the neighborhood or general public by loud, frequent or habitual barking, yelping or howling.

Property owner's signature

Date

DO NOT WRITE BELOW THIS LINE

Date rcvd:

Rcvd by:

60-Day Extension until:

Is there an existing conditional use permit (CUP) or interim use permit for uses on this property? <i>(If yes, attach a copy of the CUP.)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a nonconforming registration form been filed for this property? <i>(If yes, attach a copy of the registration form.)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

APPROVALS AND PERMITS REQUIRED (CHECK ALL THAT APPLY)

<input type="checkbox"/> Zoning Administrator	<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	_____ <i>Zoning administrator signature</i>	_____ <i>Date</i>
<input type="checkbox"/> Neighbor consent	<input type="checkbox"/> Consented <input type="checkbox"/> Denied consent	Signatures and addresses attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Planning Commission	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____ <i>Planning commission chair signature</i>	_____ <i>Date</i>
<input type="checkbox"/> Town Board	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____ <i>Town board chair signature</i>	_____ <i>Date</i>

FEES

Application fee \$ _____ Paid _____

Permit fee \$ _____ Paid _____

NOTES