



## Kennel Licence

under By-Law #2008-111

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1. Owner

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Lot \_\_\_\_\_ Concession \_\_\_\_\_ 911 Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email: \_\_\_\_\_

2. Name of Kennel \_\_\_\_\_

3. New Application

Renewal  Previous Licence No: \_\_\_\_\_

4. Fee - \$277.00 on or before March 31 (\$138.00 for Seniors 65+)  
- \$332.00 after March 31

I, \_\_\_\_\_ hereby declare that the above information is correct, that I have read and understood the provisions contained in Section 2 of By-Law #2008-111 of the Town of New Tecumseth and agree to abide by these and any other applicable by-laws pertaining to Kennels.

As a result of making this application, the undersigned acknowledges, covenant and agrees to adhere to all Provincial Public Health Restrictions as of the date of this application and indemnify and save harmless the Town of New Tecumseth from any liability for medical issues arising from the process of issuing the said License howsoever arising.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date (yyyy/mm/dd)

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I have ceased operation of a kennel on my property effective \_\_\_\_\_, 20\_\_\_\_.

Signature \_\_\_\_\_

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NOTE: Personal information is being collected under the authority of the Municipal Act 2001, Chapter 25, as amended and Police Services Act RS01990, 20 as amended and will be used by the Town of New Tecumseth to process this application for administration of this licence and to ensure I comply with all applicable statutes, regulations and by-laws. Questions regarding the collection of this information should be directed to the Clerk/Director of Administration Services, Town of New Tecumseth, 10 Wellington St. East, Alliston, Ontario, L9R 1A1. Telephone:705-435-3900/905-729-0057, Email: clerk@newtecumseth.ca