

**SUBMIT BY:** \_\_\_\_\_



**OFFICE USE ONLY**

Permit # \_\_\_\_\_  
Permit Fee \_\_\_\_\_  
Date Paid \_\_\_\_\_  
New \_\_\_\_\_ Renewal \_\_\_\_\_

**CITY OF COON RAPIDS  
MULTIPLE PET PERMIT APPLICATION**

*This permit is required under City Code 6-201, "Purpose. The City Council finds that the keeping of three or more dogs, cats, or any combination thereof on the same premises, if not properly controlled can become a nuisance to the surrounding neighborhood due to smell, noise, destruction and soiling of property, safety of persons and other animals, and general unsightliness. Therefore, the City Council also finds that the reasonable regulation of three or more dogs, cats, or any combination thereof on the same premises is necessary to protect the health, safety, and general welfare of the citizens of Coon Rapids."*

Name of Pet Owner \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address of Multiple Pet Location: \_\_\_\_\_

Phone # \_\_\_\_\_ Cell #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

How do you keep your premises sanitary? \_\_\_\_\_

How do you keep your dogs/cats quiet? \_\_\_\_\_

Number of animals requested: Dogs \_\_\_\_\_ Cats \_\_\_\_\_

Do you expect to breed the animals? \_\_\_\_\_ If so, how often? \_\_\_\_\_ Size of litters? \_\_\_\_\_

**LICENSE REQUIREMENTS**

1. Attach a site plan drawing showing the location, size and type of all structures for housing, fencing and runs and all habitable dwellings within 50 feet of the premises. Outdoor runs must be a minimum of 50 feet from any habitable dwelling and a minimum of ten feet from any property line. The city may waive the requirement for fencing upon a finding that an adequate alternative method of confining the animals to the premises is provided. If the permit is for cats only, show only the location, size and type of structures for housing.
2. It is unlawful:
  - a. to allow the animals to run at large.
  - b. to allow the animals to disturb surrounding property users.
  - c. to allow the animals to bite or cause injury to anyone.
  - d. to maintain animals in such a manner as to create a nuisance by way of noise, odor or otherwise.
  - e. to allow the premises to be kept in an unsanitary or unhealthful condition.
  - f. to burn offal or waste.
  - g. to keep or maintain more animals than provided for in the approved multiple pet permit.
3. The multiple pet permit fee is \$50.00 per year. New applicants will be charged another \$105 for inspection. An inspection will be conducted every third year of renewal and an inspection fee of \$105 will be assessed to your fee.
4. If a violation is found, you will be given notice to correct the situation. A re-inspection will be conducted to ensure compliance.
5. If the violation continues, a second notice will be mailed and an inspection will be conducted. A \$105 fee will be assessed for this inspection.

**This permit is effective for twelve months from the date of your application and is renewable annually in accordance with city codes.**

I hereby agree that the Coon Rapids Police Department may inspect the premises at all reasonable times. I understand that this permit may be revoked upon non-compliance with city codes.

Date of application: \_\_\_\_\_ Signature: \_\_\_\_\_

**Permit Requirement 1**

Attach a site plan drawing showing the location, size and type of all structures for housing, fencing and runs, and all habitable dwellings within 50 feet of the premises. Outdoor runs must be a minimum of 50 feet from any habitable dwelling and a minimum of ten feet from any property line. The City may waive the requirement for fencing upon a finding that an adequate alternative method of confining the animals to the premises is provided.

If you are requesting the City to waive the fencing requirement because you are providing an alternative method of confinement, describe that method in detail below. If the animals are to be kept primarily inside your home, state below.

**Permit Requirement 2.**

The following information is required for each dog and/cat requested to be kept under this multiple pet permit application. It is the responsibility of the permit holder to inform the Coon Rapids Police Department of any changes in the dogs and/or cats subject to this permit. Attach Additional pages if necessary. Please include a copy of your pet's rabies vaccination record with this application.

**Pet Information:**

Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_

**Pet Information**

Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_

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Name \_\_\_\_\_

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Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_

**Pet Information**

Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_

**Proof of Rabies Vaccine**

Certificate No. \_\_\_\_\_ Date of Vaccine \_\_\_\_\_

Veterinarian \_\_\_\_\_

Current City of Coon Rapids Dog Lic # \_\_\_\_\_

**Proof of Rabies Vaccine**

Certificate No. \_\_\_\_\_ Date of Vaccine \_\_\_\_\_

Veterinarian \_\_\_\_\_

Current City of Coon Rapids Dog Lic # \_\_\_\_\_

**Proof of Rabies Vaccine**

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Current City of Coon Rapids Dog Lic # \_\_\_\_\_

**Proof of Rabies Vaccine**

Certificate No. \_\_\_\_\_ Date of Vaccine \_\_\_\_\_

Veterinarian \_\_\_\_\_

Current City of Coon Rapids Dog Lic # \_\_\_\_\_

**OFFICE USE ONLY**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Number of Animals: \_\_\_\_\_

Telephone: \_\_\_\_\_

A. **INSPECTION**

The property was inspected on \_\_\_\_\_ and the following deficiencies were found:

\_\_\_\_\_  
\_\_\_\_\_

Other recommendations: \_\_\_\_\_

Inspected by: \_\_\_\_\_

B. **RECORDS CHECK**

Police Department records contain the following complaints relative to the proposed multiple pet permit: \_\_\_\_\_

\_\_\_\_\_

C. **COON RAPIDS POLICE DEPARTMENT ACTION**

We recommend \_\_\_\_\_ APPROVAL \_\_\_\_\_ DENIAL of the multiple pet permit.

Date \_\_\_\_\_ Signed: \_\_\_\_\_

Chief of Police

E. **MULTIPLE PET PERMIT COMMITTEE**

\_\_\_\_\_ APPROVED \_\_\_\_\_ DENIED

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

F. **MEDIATION**

Date Assigned: \_\_\_\_\_ Date Resolved \_\_\_\_\_  Not needed