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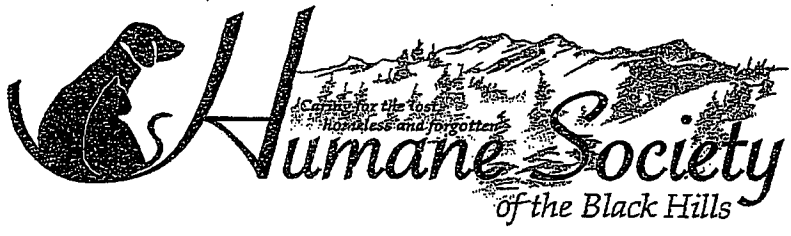
KENNEL LICENSE CHECK LIST

COMPLIANCE		TITLE	DESCRIPTION	ORDINANCE
YES	NO	FOOD AND WATER	Sufficient good wholesome food and water, Cats and Dogs fed at least once a day. Food shall be free from contamination, wholesome, palatable, and in sufficient quantity providing nutritive value to meet the normal daily requirements for the condition and size of dog or cat	City 6.08.130A City 6.08.130C
		SHELTER	Proper shelter and protection from the weather; to include heat, cold, rain, and other related conditions.	6.08.130A 6.08.130A
		VETERINARY CARE	When needed to prevent suffering, with humane care and treatment. Proper vaccinations for age and type of animal.	City 6.08.130A
		EXCRETA (waste)	Shall be removed from primary enclosures as often as necessary to prevent contamination and reduce disease hazards and odors. May not cause or allow any place where any animal is or maybe kept, to become unclean or unwholesome.	City 6.08.130 City 6.08.140
		SANITATION	Adequate; habitat of such size to allow movement without contamination of area by spread of Excreta	S.D. 40-1-2.3
		FACILITIES OR CARE	To be standard and accepted for an animal's health and well being, consistent with species, breed, physical conditions and type of animal.	S.D. 40-1-2.3

No person may keep any animal which is injured or diseased, past recovery, or unfit for any useful purpose and in suffering, or intentionally abandon to die any sick or disabled animal. A violation of this section is a Class 1 Misdemeanor (S.D. 40-1-12)

ANIMAL- Any mammal, bird, reptile, amphibian or fish, except humans (defined under State definition)

Refer to State Vet. Or City/ State Attorney for specific information



KENNEL LICENSE APPLICATION

The undersigned makes application for a Kennel License under the provisions of Rapid City Ordinance 6.08.050 Kennels or Pennington County Ordinance 4, Article V, Section 2, Licensing of Kennels for a period ending December 31, 2_____.

Name of Applicant	Social Security or Tax I.D. No.
Home Address:	Telephone No:
Business Name:	
Business Address:	Telephone No:
If partnership, the name and address of each partner:	
If a corporation, the names and addresses of the officers:	
Description of the activity to be carried on under such license:	
Number of animals to be housed at this location at any given time:	
Number of animals six months or older owned by applicant::	
Dogs (Specify Breed):	
Cats (Specify Breed):	
Other (Specify):	
Application made this day of	
Contact Person: Name:	
Address:	
<i>Applicant shall annually update information with the Humane Society of the Black Hills</i>	
Signature of Applicant:	
Approved by	Animal Control
Approved by	City/ County Zoning

NOT TRANSFERABLE

The Humane Society of the Black Hills is under no obligation to refund license application fees if denied