



Town of Grand Rapids

Dog Exemption Application

Initial Fee \$75
Annual Fee \$20

FOR OFFICE USE ONLY

Date Received:	Date Paid:	Permit #:
----------------	------------	-----------

APPLICANT INFORMATION

Name:	Does Applicant Rent or Own the Site Address? (Please initial one) <input type="checkbox"/> Rent <input type="checkbox"/> Owner	
Phone Number:	Secondary Phone Number:	Email Address:

PROPERTY INFORMATION

Owner Name:	Site Address:	Parcel #:
Owner Phone Number:	Owner Address, City, State, and Zip:	Owner Email Address:

DOG INFORMATION (Copies of rabies certificates required with application)

Dog Names	Breed	Age	Gender (F/M)	Spayed/Neutered

I understand that I am subject to all applicable codes, statutes, ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate.

Applicant (Sign): _____ Print: _____ Date: _____

HUMANE SOCIETY ONLY

Inspection Notes: _____ _____ _____
Approved ____ Denied ____ Humane Society Officer: _____ Date: _____

PLAN COMMISSION ONLY

Commission Notes: _____ _____ _____
Approved ____ Denied ____ Plan Commission Chairperson: _____ Date: _____