



"meeting community needs  
.....enhancing quality of life"

## APPLICATION for the Operation of a PET STORE/KENNEL

|                                  |                 |                           |
|----------------------------------|-----------------|---------------------------|
| <b>FEES ARE NON-REFUNDABLE</b>   |                 | Date Rec'd <u>8/19/24</u> |
| See SECTION 5 for Fee Schedule   |                 |                           |
| License Fee - Initial            | \$ _____        | Acct. 11030.4309          |
| License Fee - Renewal            | \$ <u>75.00</u> | Acct. 11030.4309          |
| Investigation Fee                | + \$ 7.00       | Acct. 100.2359            |
| Total Amount Paid                | \$ <u>82.00</u> | Receipt <u>7287-1</u>     |
| License period July 1 to June 30 |                 |                           |

|                                                                                                                                                                                                                                                |                                          |                                                                     |                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------|---------------------|
| <b>SECTION 1 – BUSINESS LOCATION – Answer all questions completely. Please PRINT clearly</b>                                                                                                                                                   |                                          |                                                                     |                     |
| <b>NOTE: The location of a Kennel or Pet Store is subject to applicable zoning and other regulations.</b>                                                                                                                                      |                                          |                                                                     |                     |
| Business Name <u>Petco #1656</u>                                                                                                                                                                                                               |                                          |                                                                     |                     |
| Business Street Address<br><u>3829 E Calumet Street</u>                                                                                                                                                                                        | City<br><u>Appleton</u>                  | State<br><u>WI</u>                                                  | Zip<br><u>54915</u> |
| Business Telephone Number<br><u>920-997-1543</u>                                                                                                                                                                                               |                                          |                                                                     |                     |
| <b>SECTION 2 – APPLICANT INFORMATION</b>                                                                                                                                                                                                       |                                          |                                                                     |                     |
| Name<br><u>Samantha Garcia</u>                                                                                                                                                                                                                 |                                          |                                                                     |                     |
| Home Street Address<br><u>654 Richland Hills Drive, Suite .</u>                                                                                                                                                                                | City<br><u>San Antonio</u>               | State<br><u>TX</u>                                                  | Zip<br><u>78245</u> |
| Date of Birth                                                                                                                                                                                                                                  | Male <input type="checkbox"/>            | Female <input type="checkbox"/>                                     | Telephone Number    |
| <b>SECTION 3 – SERVICES TO BE PROVIDED</b>                                                                                                                                                                                                     |                                          |                                                                     |                     |
| Please check the type(s) of services your establishment will offer: <input checked="" type="checkbox"/> Live animals <input checked="" type="checkbox"/> Pet Food                                                                              |                                          |                                                                     |                     |
| <input checked="" type="checkbox"/> Pet Accessories                                                                                                                                                                                            | <input checked="" type="checkbox"/> Fish | <input type="checkbox"/> Other                                      |                     |
| <b>SECTION 4 – PENALTY NOTICE</b>                                                                                                                                                                                                              |                                          |                                                                     |                     |
| Having knowledge of all governmental laws, rules or regulations governing the keeping or protection of animals, I hereby certify that the information provided in this application is true and correct to the best of my knowledge and belief. |                                          |                                                                     |                     |
| Signature of Applicant: <u>Samantha Garcia</u>                                                                                                                                                                                                 |                                          |                                                                     |                     |
| <b>SECTION 5 – FEE SCHEDULE</b>                                                                                                                                                                                                                |                                          |                                                                     |                     |
| Pet Store License                                                                                                                                                                                                                              | Initial Fee - \$90.00                    | Renewal Fee – \$75.00                                               |                     |
| Kennel License                                                                                                                                                                                                                                 | 10 or less animals - \$55.00             | 25 or less animals - \$130.00                                       |                     |
|                                                                                                                                                                                                                                                | 50 or less animals - \$255.00            | More than 50 animals - \$5.00 per animal with a minimum of \$280.00 |                     |
| <b>FOR OFFICE USE ONLY</b>                                                                                                                                                                                                                     |                                          |                                                                     |                     |
| Dept.                                                                                                                                                                                                                                          | Approve                                  | Deny                                                                | By                  |
| Police                                                                                                                                                                                                                                         |                                          |                                                                     |                     |
| Fire                                                                                                                                                                                                                                           |                                          |                                                                     |                     |
| City Sealer                                                                                                                                                                                                                                    |                                          |                                                                     |                     |
| Inspection                                                                                                                                                                                                                                     |                                          |                                                                     |                     |
| Community Development                                                                                                                                                                                                                          |                                          |                                                                     |                     |
| S&L                                                                                                                                                                                                                                            | Council                                  | Date Issued                                                         | Exp. Date           |
|                                                                                                                                                                                                                                                |                                          |                                                                     | License Number      |

11-01-09 Reasonable accommodations for persons with disabilities will be made upon request and if feasible.

Return application to: City Clerk, 100 North Appleton Street, Appleton, WI 54911-4799