



Ashtabula County Auditor David Thomas

25 West Jefferson Street
Jefferson, Ohio 44047-1092
Phone: 440-576-3783 ~ Fax: 440-576-3797
auditor@ashtabulacountyauditor.org

AUDITOR LICENSE HOURS

8:00am-4:30pm

Mon-Fri

Closed daily 12pm-1pm for lunch
(440) 576-3794

INSTRUCTIONS FOR ASHTABULA COUNTY KENNEL LICENSES:

ORC 955.02 defines a KENNEL as an establishment that keeps, houses, and maintains adult dogs for the purpose of breeding the dogs for a fee or other consideration received through a sale, exchange, or lease and that is not a high volume breeder.

BY MAIL

1. Complete this form. Be sure the correct kennel owner and street address appear on all applications.
2. List the breeds kept, along with the number of males and females over 3 months of age for each breed.
3. **BEFORE JANUARY 31, LICENSING RATE IS \$60.00 FOR 5 TAGS and \$1.00 for each additional tag.**
Enclose a check or money order for the correct fees payable to: **Ashtabula County Auditor**. Please do not send cash. Your application cannot be processed without the correct fees. Statutory late penalty increases the licensing rate to **\$120.00 for 5 tags AFTER January 31.**
4. Please return the application and a check or money order in the enclosed return envelope. A receipt will be returned to you with your 2024 license tag(s).

IN PERSON

Tags may be purchased in person at the Ashtabula County Auditor's Office, 25 West Jefferson Street, Jefferson, Ohio 44047. Please bring the attached form when purchasing tags. Payment Methods Cash, checks, money orders & credit/debit cards.

ON-LINE

Register your dog on-line at www.doglicenses.us/OH/Ashtabula. Credit card payments only; online processing fee applies. To access your pre-filled form you will need your Account ID and Password listed below.

Account ID:

Password:

Certificates of registration and registration tags shall be valid only during the CALENDAR YEAR or YEARS for which they are issued. ORC Sec 955.09.

KENNEL RENEWALS

Include your Vendor License number in the space provided on the application below.

APPLICATION for the registration of a Kennel for the year 2024

Breeds Kept	# Males	# Females

Vendor #: 04- _____

Owner Information

Name: _____

Street Address: _____

Mailing Address: _____
if different(e.g. P.O. Box)

City: _____ State: _____ ZipCode: _____

DAVID THOMAS, Ashtabula County Auditor
25 WEST JEFFERSON STREET, JEFFERSON, OHIO 44047

License	# Tags	Fee Paid	Penalty	Total
Kennel License	--- 5 ---	\$60.00		
Add'l Tags (optional)		\$1.00 (each)	-----	
--- Office Use: 2024 License #s ---				

A penalty in an amount equal to the registration fee shall be assessed if Kennel License is not secured on or before January 31, or within 30 days after the person becomes the owner of such kennel. ORC Sec 955.04, 05.

The undersigned says that the facts indicated above ARE TRUE.

Signature of Applicant _____

Date Signed _____

Phone # _____ Email _____

Deputy or Agent _____