



E.J. CONN JEFFERSON COUNTY AUDITOR

301 Market St, 4th Fl
PO Box 159
Steubenville, OH 43952
www.jeffersoncountyoh.com

OFFICE HOURS
Mon - Fri: 8:30am - 4:30pm
740-283-8511

INSTRUCTIONS FOR JEFFERSON 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.

IN PERSON OR BY MAIL

1. The numbers reported by breed below should include each dog more than three months of age.
2. The \$50 kennel fee includes five individual dog tags. Each additional tag costs \$1 each. Please enclose a check or money order for the correct fee payable to **Jefferson County Auditor**. **DO NOT SEND CASH.**
After January 31, the statutory penalty increases the price of each kennel license to \$100. Processing of the license requires the correct fee.
3. Please return the application, check or money order, and a self-addressed stamped envelope in the enclosed return envelope. A receipt will be enclosed with your 2025 license tag(s).

Tags may be purchased in person at the Jefferson County Auditor's Office, 301 Market St, 4th Fl, Steubenville. Please bring the attached form when purchasing tags.

Certificate of registration and registration tags shall be valid only during the CALENDAR year IN which they are issued, AND DURING THE CALENDAR YEAR OR YEARS FOR WHICH THEY ARE ISSUED. ORC Sec 955.09.

APPLICATION for the registration of a Kennel for the year 2025

Breeds Kept	# Males	# Females

E.J. CONN, Jefferson County Auditor
301 Market St, 4th Fl; PO Box 159; Steubenville, OH 43952

License	# Tags	Fee Paid	Penalty	Total
Kennel License	--- 5 ---	\$50.00		
Add'l Tags (optional)		\$1.00 (each)		
--- Office Use: 2025 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.

Owner Information

Name: _____

Street Address: _____

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

City: _____ State: _____ ZipCode: _____

Signature of Applicant _____

Date Signed _____

Phone # _____ Email _____