



MATTHEW W. GEARHARDT
MIAMI COUNTY AUDITOR

201 WEST MAIN STREET
 TROY, OHIO 45373

OFFICE HOURS
 8:00 AM - 4:00 PM
 Weekdays
 (937) 440-5944

INSTRUCTIONS FOR MIAMI 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 SALES BEGIN 12/1/2017

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. Enclose a check or money order for the correct fees payable to: **Miami County Animal Shelter**. Please do not send cash. **Before January 31**, licensing rate is \$80.00 for the first 5 tags and \$1.00 for each additional tag. **After January 31**, statutory late penalty increases the licensing rate to \$160.00 for the first 5 tags. Your application cannot be processed without the correct fees.
4. Please return the application and check or money order to **1110 N. County Rd. 25-A, Troy, OH 45373**. A receipt will be returned to you with your 2020 license tag(s).

You may purchase the tag(s) in person at the Animal Shelter, 1110 N. County Rd. 25-A, Troy. Please bring the attached form when purchasing tags.

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.

APPLICATION for the registration of a Kennel for the year 2020

Breeds Kept	# Males	# Females

Matthew W. Gearhardt, Miami County Auditor
 201 West Main St. Troy, OHIO 45373

License	# Tags	Fee Paid	Penalty	Total
Kennel License	--- 5 ---	\$80.00		
Add'l Tags (optional)		\$1.00 (each)	-----	
--- Office Use: 2020 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.

Total Fee Paid	\$
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Owner Information

Name: _____
 Street Address: _____
 Mailing Address: _____
if different (e.g. P.O. Box)
 City: _____ State: _____ ZipCode: _____

Signature of Applicant _____
 Date Signed _____
 Phone # _____ Email _____
 Deputy or Agent _____