STATE OF NEW HAMPSHIRE
DEPARTMENT OF AGRICULTURE, MARKETS & FOOD
DIVISION OF ANIMAL INDUSTRY
603-271-2404

Application for Animal Shelter Facility License

First Time Applicants Please Submit Proof of Non-profit Status

The undersigned hereby applies for a license as an animal shelter facility at the following described premises, in accordance with the provisions of RSA 437, for the period ending June 30, _____.

ANNUAL FEE: $200.00 per each premise. (Fiscal Year July 1, _____to June 30,_____.) Any **new** animal shelter facility applying for a license after January 1, and before June 30, the license fee shall be $100.00.

Premises to be licensed:_____
Organization/Individual

_____NH_____
Street or P.O. Box City or Town Zip

Telephone:_____ E-mail address: _____

Shelter hours:_____

Is shelter operated in the home? Yes____ No____ Are you zoned for this business: Yes___ No ___

Is there a microchip reader available? Yes____ No ____

At any time have you been convicted of animal welfare violations as a pet owner or shelter business?

Yes ___ No____ if yes, explain:_____

_____

Submitted by:_____
Individual, Firm or Corporate Name

Street or P.O. Box City/Town State Zip

Signature of Owner or Authorized Agent:_____
(Please also print name if signature is illegible)

_____
Title Telephone
(If different from above)

Make checks payable to : Treasurer, State of New Hampshire
License fee is non-refundable

Mail application and fee to: Division of Animal Industry
P. O. Box 2042
Concord, NH 03302-2042

Revised 8/07