

CITY OF LAS VEGAS - DEPARTMENT OF PUBLIC SAFETY ANIMAL PROTECTION SERVICES

495 S Main St, Las Vegas, NV 89101 (Attn: Animal Protection Services) 702-229-6444 #2 (Voice) 702-386-9108 (TDD)

DOG FANCIER'S PERMIT APPLICATION

☐ NEW ☐ RENEWAL

Owner: _____ Telephone: _____

Address: _____ Zip Code: _____
(NO P.O. BOXES)

Email Address: _____

Show Name _____

Show Dates _____ Show Location _____

City of Las Vegas Ordinance No. 7.04.230 "Dog fancier" means any person owning, keeping, or possessing on his property, provided such person has safe, adequate cages in a completely enclosed building on the property, at one location, up to eight adult dogs for the purpose of showing in recognized dog shows, field trials or obedience trials, for working and hunting, or for improving the variety of breed in temperament or confirmation with a view to exhibition in shows or trials or for use as working dogs in hunting; said dogs shall be registered with at least one association recognized by the Animal Regulation Officer and must be entered in at least one dog show per calendar year or, if spayed and neutered, need not be so registered or shown. AKC is the only recognized association.

	BREED	SEX	AGE	COLOR	NAME	PET LICENSE #	MICROCHIP#	RABIES EXP. DATE	SPAY/ NEUTER DATE
1									
2									
3									
4									
5									
6									
7									
8									

I understand that if this permit is granted, I will not alter its terms or allow said animals to become a nuisance. I further understand that if a violation does occur, this permit is subject to non-renewal and/or the issuance of a citation to appear in court.

Signature _____ Date: _____

SUBMIT COMPLETED APPLICATION TO ANIMAL PROTECTION SERVICES AT THE ABOVE ADDRESS

Do not send payment with this application. A bill for \$50 will be sent from City of Las Vegas Department of Finance. Upon receipt of payment an inspection will be scheduled.

DO NOT WRITE BELOW THIS LINE

RECEIPT # _____ PERMIT # _____ EXPIRES: _____

APPROVED ☐
DISAPPROVED ☐BY: _____
ANIMAL REGULATION OFFICER or Designee

DATE: _____