



## DANGEROUS ANIMAL PERMIT APPLICATION

<b>Name:</b> _____	<b>Cell Phone:</b> _____
<b>Email:</b> _____	<b>Work Phone:</b> _____
<b>Address:</b> _____	<b>City:</b> _____ <b>ZIP:</b> _____
<b>Name of Business:</b> _____	
<b>Address:</b> _____	<b>City:</b> _____ <b>ZIP:</b> _____
<b>Driver Lic/ID:</b> _____	
<b>Date of Birth:</b> _____ <b>Height:</b> _____ <b>Weight:</b> _____ <b>Hair:</b> _____ <b>Eyes:</b> _____	

Permit Fees					
CHECK ALL APPLICABLE	TYPE OF PERMIT	DESCRIPTION	FEE	PER	
	A330	Possession of dangerous animal	Permit fee for dangerous animal (includes officer inspection and administration of permit).	\$651	Annual
	A361	Property Reinspection Fee	Fee to reinspect properties of groups [501(C)(3)] exempt from breeding/transfer application and breeding permit fees]	\$128	Per hour Reinspection

**Address and location where animal(s) or Reptile(s) will be kept:**

<b>Name:</b> _____	<b>Phone:</b> _____
<b>Address:</b> _____	<b>City:</b> _____ <b>ZIP:</b> _____
<b>Owner of property:</b> _____	<b>Phone:</b> _____
<b>Lessee of said property:</b> _____	<b>Phone:</b> _____
<b>Owner Email:</b> _____	<b>Lessee Email:</b> _____

**Types of Animals for which permit is sought:**

Quantity	Description (Breed, Age, Sex, Weight, Size/Length
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<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

**Describe the housing arrangements for the animals:**

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**Describe the safety precautions to be taken in the care and keep of the animal(s) or reptile(s):**

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## DECLARATIONS

I HEREBY DECLARE THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE. I FURTHER UNDERSTAND THAT THE CITY OF LONG BEACH ANIMAL CARE SERVICES BUREAU STAFF MAY INSPECT THE PROPERTY TO ENSURE PROPER CARE OF THE ANIMALS(S) OR REPTILE(S) NAMED IN THE PERMIT. I UNDERSTAND THAT ANY MISSTATEMENTS OR OMISSIONS OF MATERIAL FACT, VIOLATIONS, OR ISSUE OF NON-COMPLIANCE MAY CAUSE DENIAL OR REVOCATION OF THE PERMIT.

\_\_\_\_\_  
INITIAL HERE

I UNDERSTAND THAT COMPLETING THE APPLICATION AND PAYMENT OF FEES DOES NOT INDICATE APPROVAL OF THE REQUESTED PERMIT

\_\_\_\_\_  
INITIAL HERE

I FURTHER UNDERSTAND THAT FOLLOW UP INSPECTIONS ARE SUBJECT TO A RE-INSPECTION FEE AS DESCRIBED ABOVE

\_\_\_\_\_  
INITIAL HERE

**Date:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Signed:** \_\_\_\_\_

## FOR ANIMAL CARE SERVICES BUREAU USE ONLY

**Animal Permit Approved**

**By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Status of Other City Permits:**

**By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Inspection Performed:**

**By:** \_\_\_\_\_

Required

**Date:** \_\_\_\_\_

**Photos Attached:**  YES  NO

**Comments:**

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