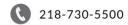


City Clerk's Office



Room 318 411 West First Street Duluth, Minnesota 55802-1189

FOR OFFICE USE ONLY	
DATE	
LICENSE #	

APPLICATION

Type or clearly write in your information below. Submit all pages to the above address.

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

ANIMAL RESCUE GROUP OR ORGANIZATION REGISTRATION

NAME OF GROUP/ORGANIZATION	GROUP/ORGANIZATION ADDRESS
	
PHONE NUMBER	
	MAILING ADDRESS (IF DIFFERENT)
EMAIL	
PRIMARY CONTACT NAME	
	PRIMARY CONTACT PHONE NUMBER

AUTHORIZED SIGNATURE	DATE
I HEREBY STATE THAT ALL INFORMATION HERE I COMPLY WITH ALL PROVISIONS OF THE ORDINAN THE STATE OF MINNESOTA AN	CES OF THE CITY OF DULUTH AND LAWS OF
INTAKE AND OUTCOME INFORMATION MUST POSTED ONLINE FOR ONE YEAR AFTER INITIAL FOR ORGANIZATIONS ARE SUBJECT TO INSPECTION SANITARY MANNER, AND ACCESS MUST BE	POSTING. ANIMAL RESCUE GROUPS AND IS. FACILITIES MUST BE OPERATED IN A
WEBSITE URL WHERE INTAKE AND OUTCOME INFO	PRMATION IS POSTED AND UPDATED
NUMBER EUTHANIZED AT REQUEST OF OWNER	
NUMBER THAT WERE LOST	
NUMBER THAT DIED	
NUMBER TRANSFERRED TO ANOTHER AGENCY	
NUMBER RECLAIMED BY OWNER	
NUMBER ADOPTED	
FINAL OUTCOMES:	
TOTAL INTAKE	
NUMBER RECEIVED FOR OTHER REASONS	
NUMBER RECEIVED FROM OTHER AGENCIES	
NUMBER RELINQUISHED BY OWNER	
<u>LIVE INTAKE:</u>	