



City of Coos Bay
Community Development Department
 500 Central Avenue, Coos Bay, Oregon 97420
 Phone 541-269-8918 Fax 541-269-8916

Animal Control Permit

Pursuant to Coos Bay Municipal Code 6.05 "ANIMAL PERMIT"

Name: _____

Email: _____

Primary Phone: _____ Alternate Phone: _____

Mailing Address: _____

Physical Address: _____

Legal Description: Township _____ Range _____ Section _____

Tax Lot # _____ Lot size (acres of sq. ft.) _____

Do you rent or own this residence? Rent _____ Own _____

If you rent, please provide written documentation from property owner that allows the animal(s) for which you are applying.

Is this a New Permit / Renewal / Update Application? _____ New _____ Renewal _____ Update

You are required to report any changes to any items shown on this form within 10 days of date of change or your Animal Control Permit may be revoked as per CBMC 6.05.050 (4).

NUMBER & TYPE OF ANIMALS

- | <u>List 1</u> | <u>List 2</u> |
|------------------|--|
| _____ Horse/Pony | _____ Cat (other than Felis catus) |
| _____ Mule | _____ Wolf or coyote (other than Canis familiaris) |
| _____ Donkey | _____ Poisonous reptile or reptile whose average adult length is greater than 2 ft |
| _____ Sheep | _____ Bees |
| _____ Llama | _____ Bats |
| _____ Cow | _____ Bears |
| _____ Goat | _____ Non-human primates |
| _____ Pig | _____ Other non-native mammals, reptiles, and amphibians |
| _____ Rabbit | _____ Any animals for the purpose of selling on a regular basis (YES/NO) |
| _____ Poultry | |
| _____ Furbearer | |

Description of animals. Please include breed, type, species, gender, size, length, and additional information.

Describe how animals will be housed or maintained, including the size and location of the shelter or enclosure.

Describe the methods of solid waste containment and disposal, and how often waste disposal will take place.
Attach a Site Plan that includes all structures on site.

Describe current uses adjacent to your property. Mark distances to where your animals will be kept as compared to structures, fences, etc., **including distances from buildings on adjacent properties on the Site Plan.**

Applicant's Signature _____

Date _____

Annual Fee: \$50.00

STAFF REVIEW ONLY – Do not mark in this box

Planning Dept. Approval _____	Conditions _____ _____ _____
Police Dept. Approval _____	Conditions _____ _____ _____
Fire Dept. Approval _____	Conditions _____ _____ _____