

# Permit Application

## ANIMAL HARBOURING



This permit application is being made under Part Nine – Permits, of the Town of Drayton Valley’s Responsible Pet Ownership Bylaw, 2023/03/P, to violate parts 10, 11, 12 or 13 of the bylaw.

OWNER/APPLICANT INFORMATION		
LAST NAME	FIRST NAME	DATE OF BIRTH
ADDRESS		
PHONE NUMBER	EMAIL ADDRESS	
Property Owner Information		<input type="checkbox"/> Property Owner is same as applicant
ANIMAL(S) INFORMATION		
1) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
2) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
3) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
4) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
5) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
6) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
7) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal
8) Name	Type (Cat/Dog)	Breed/Size/Weight
Age	Spayed/Neutered (With Date)	Date of Possession of Animal

The personal information collected on this form is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act*. It will be used in the operation of the Community Standards Bylaw 2022/06/P for bylaw enforcement purposes. If you have any questions about the collection or use of this information, contact the Records Management Coordinator: 5120-52 Street, Box 6837, Drayton Valley, Alberta, T7A 1A1. Phone: 780-514-2200

## QUESTIONS

**Previous Owner Information** (if applicable)

**HOUSING:** Where will the animal(s) be housed? Inside, Outside. Shelter being used if outside?

**ABSENCE PLANNING:** What plan do you have in place for absences (care for animals when you are away?)

**EMERGENCY PLANNING:** What plan do you have in place for emergencies where you may be required to evacuate with the animal(s)?

**TRAINING:** What training has been completed? (Owner/Applicant and Animals)

**HEALTH:** What is the general state of health for each animal on the application?

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)
- 7)
- 8)

**HISTORY:** History of Animals (Incidents either reported or not reported)

**REASON:** I am requesting this harbouring permit to be granted for the following reasons:

**ADDITIONAL INFORMATION:** Is there any additional information you would like to share that you believe may be helpful in determining whether to approve or deny this application?

**ACKNOWLEDGEMENTS**

**Please read and acknowledge the following statements:**

1. I certify that I will abide by all regulations if I receive the permit, knowing that failures to comply may result in the cancelation of this, or future permits, and enforcement action may be taken.
2. I acknowledge that the granting of a permit shall in no way relive me from complying with other requirements of the bylaws of the Town of Drayton Valley, or any Provincial or Federal Statutes.
3. I understand that failure to provide all the required information may result in the application being delayed or denied.
4. I certify that the above information and statements are true and correct to the best of my knowledge.
5. I understand that providing false or misleading information or statements may disqualify my application or permit and may result in prosecution.
6. I understand that should a permit be granted, I indemnify the Town of Drayton Valley from all liability whatsoever arising from the approval of the application and undertake responsibility for all actions.
7. I understand that applying for a permit does not necessarily mean that a permit will be issued.
8. I understand that if the permit is denied, I may be required to remove/rehome animals within the stated time to ensure I am in compliance with the bylaw.
9. I understand that I am required to re-apply for a new harbouring permit, at the expiry of the permit, should it be granted, any pay any applicable fees required at that time.
10. I would like to receive the approval or denial of this permit application, via:  
 Email                       Regular Mail                      \*Permit will be sent to contact information listed above.

APPLICANTS SIGNATURE:	DATE (MM/DD/YYYY)
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**Once this permit application is complete, please send the application with any applicable attachments to [enforcement@draytonvalley.ca](mailto:enforcement@draytonvalley.ca) or drop it off with Attention: Enforcement Services at 5120-52 Street, Drayton Valley, AB, T7A 1A1. Incomplete applications may result in the application being delayed or denied.**

OFFICE USE ONLY	
Date Received	Received By (Any Town Staff)