

# TOWN OF SHELBY

County of La Crosse

State of Wisconsin



2800 Ward Ave

La Crosse, WI 54601

Phone: (608)788-1032

Email: info@townofshelby.com

**APPLICATION TO EXCEED 2-DOG LIMIT** Application Date: \_\_\_\_\_

Please circle one: NEW APPLICATION/ RENEWAL

Owner Information:

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ DOB: \_\_\_\_\_

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

I (We) hereby apply for approval to license a third dog over the age of three (3) months within a residential district in the Town of Shelby pursuant to Town of Shelby Ordinance 2.09.

Have you ever received a citation or been involved in an incident which required police intervention that was the result of the behavior of your animal? **YES/ NO**

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Please present evidence that a third dog will not interfere with the safety, health, and general welfare of the community:

Dogs Names: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please enclose **\$10.00** application fee and submit your application to:

Town of Shelby  
2800 Ward Ave  
La Crosse, WI 54601

**OFFICE USE ONLY:**

Your application is hereby (circle one): **APPROVED/ DENIED**

\_\_\_\_\_ Dated this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Fortune M. Weaver, Town Clerk