



Lincoln-Lancaster County Health Department

**Animal Control**

**Application For Pet/Groom Shop Permit**

1. Name of Facility \_\_\_\_\_  
Address of Facility \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone Number of Facility \_\_\_\_\_  
Hours of Operation \_\_\_\_\_

2. Type of Facility and Fee
- Pet Shop Only ..... \$45.00
  - Groom Shop Only ..... \$45.00
  - Pet Shop with Groom Shop ..... \$65.00
  - Mobile Groom Shop ..... \$45.00
  - Additional Mobile Groom Shops ..... \$15.00 per unit

3. Name of Owner/Operator \_\_\_\_\_  
Address \_\_\_\_\_ Zip Code \_\_\_\_\_

4. Permits are not transferable from person to person or from place to place.

5. Permits expire September 30th of each year.

*To Applicant:*

Upon receipt of this application and the permit fee, an inspection of the facility will be performed. If the facility meets minimum standards, a permit will be issued. Make check payable to Animal Control. Please send the completed application and fee to:

**Animal Control  
3140 N Street  
Lincoln, NE 68510-1513**

Signature of Applicant \_\_\_\_\_ Title \_\_\_\_\_  
Date \_\_\_\_\_ Amount Paid \_\_\_\_\_

<b>Animal Control Use Only</b>	
Fee Received \$ _____	Permit: <input type="checkbox"/> Issued <input type="checkbox"/> Denied
Permit Number _____	Date _____