

Department of Public Health

Dottie-Kay Bowersox, MSA
Public Health Administrator
730 Washington Avenue
Racine, Wisconsin 53403
262-636-9201
262-636-9165 FAX



Website: www.cityofracine.org/Health
Email: publichealth@cityofracine.org

Environmental Health Division
262-636-9203
Community Health Division
262-636-9431
Laboratory Division
262-636-9571

APPLICATION FOR PET SHOP PERMIT

Pursuant to Municipal Code Chapter 22

Return application with payment to the City of Racine Department of Customer Service
730 Washington Ave, Room 103, Racine, WI 53403 – Make checks payable to "CITY OF RACINE"

| | |
|---|---|
| NAME OF PERMITTEE (INDIVIDUAL, LLC, CORP, INC, ETC.) | ESTABLISHMENT NAME (DBA) |
| MAILING ADDRESS | CITY, STATE, ZIP CODE |
| ESTABLISHMENT ADDRESS | CITY, STATE, ZIP CODE |
| NAME OF CONTACT, TITLE | NAME OF LOCAL CONTACT IF DIFFERENT, TITLE |
| CONTACT PHONE NUMBER | ESTABLISHMENT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | ESTABLISHMENT EMAIL ADDRESS |
| Are you planning on remodeling? <input type="checkbox"/> YES* <input type="checkbox"/> NO * If yes, provide construction plans. | |

1. Anticipated opening date: _____

2. Proposed hours of operation (Include A.M. or P.M.):

| Day of the Week | Open | Close |
|-----------------|------|-------|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |
| Saturday | | |
| Sunday | | |

3. Animals offered for sale:

DOG/PUPPY

CAT/KITTEN

BIRD

RABBIT

GUINEA PIG

FERRET

CHINCHILLA

HEDGEHOG

HAMSTER

GERBIL

RAT

MOUSE

TURTLE

TORTOISE

SNAKE

LIZARD

AMPHIBIAN

SPIDER/TARANTULA

FISH

OTHER (describe)

| | |
|-----------------------------------|----------------|
| Pre-Inspection Fee | \$_____ |
| Permit Fee | \$_____ |
| Other Fees (if applicable) | \$_____ |
| Total Paid \$_____ | |