

Prescribed by the Commissioner of Agriculture  
Effective July 1, 2023

**LOCAL KENNEL LICENSE APPLICATION**

**CGS §22-342 Local Kennel Licenses**

**Town of Beacon Falls, CT**

Owner Name: \_\_\_\_\_

Kennel Name: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Dogs: \_\_\_\_\_ Fee \$50 up to 10 dogs

Fee \$100 more than 10 dogs

**Make Check Payable to: Beacon Falls Town Clerk**

**Mail To: Beacon Falls Town Clerk**

**10 Maple Ave.**

**Beacon Falls, CT 06403**

**License Year July 1 through June 30**

Rabies certificates do not have to be submitted with registration, however, all dogs must have current rabies vaccination.