



ANIMAL EVENT PERMIT

Recommendation for approval will be based on completion of application, payment in full, inclusion of the insurance certificate, and written response to the attached questionnaire.

Temporary Animal Permit

APPLICANT PERMIT INFORMATION	
Date of Application:	Fee Paid: \$
Name of Applicant:	Phone:
Address:	
City/State/ZIP:	
Description of Temporary Event:	
Requested Date of Temporary Event:	
Requested Times of Event:	From: To:
Address of Event:	
Vendor Providing the Animals:	Phone:
24-hour Emergency Contact Name:	Phone:
APPLICANT NAME (PRINT):	
APPLICANT SIGNATURE:	Date Signed:
RECOMMENDATION	
STAFF RECOMMENDATION	<input type="checkbox"/> APPROVE <input type="checkbox"/> DENY
Comments:	
STAFF NAME/TITLE (PRINT)	
STAFF SIGNATURE:	Date Signed:
FINAL ACTION	
CITY ACTION:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
CITY NAME/TITLE (PRINT)	
CITY SIGNATURE:	Date Signed:
CITY SIGNATURE:	Date Signed:

Please complete the questionnaire below and submit with payment to:

**BURNSVILLE POLICE DEPARTMENT
100 CIVIC CENTER PARKWAY
BURNSVILLE, MN 55337**

Checks may be made out to: City of Burnsville

Please be sure to include a copy of the insurance certificate with each application.

ANIMAL EVENT PERMIT
Burnsville Animal Control

This questionnaire should be completed by the vendor providing the animals.

<p>1. List specific types of animal and numbers of each to be exhibited and/or housed in Burnsville for the requested event. Example: 6 Shetland ponies, 4 African Pygmy Goats, etc.</p>
<p>2. Types of acts and activities the animals will be engaged in.</p>
<p>3. Description of method used to protect the public from getting injured by one of the animals.</p>
<p>4. Describe the method used for overnight stabling and/or housing of the animals, if applicable.</p>
<p>5. Describe the cleanup methods <i>and frequency</i> that will be used to keep the area clean of animal waste.</p>

<p>6. What kind of insurance coverage do you have in case the public is injured by any animals? (You must include a copy of the insurance certificate with each application.)</p>
<p>7. Provide a statement indicating that you are aware that the permit may be revoked and the event closed down if violations of humane laws and/or ordinances and/or statutes are found or the animal management plan listed in this questionnaire are not followed.</p>
<p>8. Describe the number of staff available, the method of capture, and the equipment to be used to catch animals should they escape from your custody.</p>
<p>9. List the expiration date of the last rabies vaccinations given to each animal, if applicable.</p>
<p>10. Provide the name, address and phone number of the veterinarian used.</p>
<p>11. List your USDA #, if licensed.</p>