



Jersey Shore Regional Health Commission

628 Shrewsbury Avenue

Tinton Falls, NJ 07701

PHONE:(732) 493-9520 • FAX (732) 493-9521 • www.JSRHC.org



APPLICATION: KENNEL, PET SHOP, SHELTER & POUND PLAN REVIEW

New Jersey State Sanitary Code, Chapter 23, Animal Facility Operation, N.J.A.C. 8:23A-1.2(c) requires plan review, and approval by the local health authority for any facility constructed or renovated after January 17, 1995. Construction or renovation may not be initiated until plans and specifications have been approved by the health and construction authorities of the municipality where the establishment will reside in.

NEW KENNEL, PET SHOP, SHELTER & POUND PLAN REVIEW FEE - \$200.00

Per Jersey Shore Regional Health Commission Chapter 7 Non- Food Inspection Services Section 2.4

Establishment Information	
Trade Name:	_____
Owner / Corporate Name:	_____
Owner/Corporate Address:	_____
	Street
	City, State, Zip Code
Establishment Address:	_____
	Street
	City, State, Zip Code
Phone #:	_____
Fax #:	_____

Operator / Project Contact	
Name:	_____
Phone #:	_____
Email:	_____

Project Information	
Anticipated Start Date:	____/____/____
Anticipated Completion Date:	____/____/____
Water Source:	<input type="checkbox"/> Public <input type="checkbox"/> Well
Sewage Disposal:	<input type="checkbox"/> Public <input type="checkbox"/> Septic

Checks made Payable to: Jersey Shore Regional Health Commission

Type of Project	
<input type="checkbox"/> New Construction	<input type="checkbox"/> Renovation/Remodel

Type of Operation	
<input type="checkbox"/> Kennel	<input type="checkbox"/> Pet Shop
<input type="checkbox"/> Shelter / Rescue	<input type="checkbox"/> Pound

Animals being sold and/or housed at facility	
<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats

Aquatic pets:		
<input type="checkbox"/> Fresh Water Fish	<input type="checkbox"/> Salt Water Fish	<input type="checkbox"/> Crustaceans

Birds:		
<input type="checkbox"/> Canary	<input type="checkbox"/> Cockatiel	<input type="checkbox"/> Parrot
<input type="checkbox"/> Chicken	<input type="checkbox"/> Pigeon	<input type="checkbox"/> Finch

Rodents:		
<input type="checkbox"/> Chinchillas	<input type="checkbox"/> Gerbil	<input type="checkbox"/> Guinea Pig
<input type="checkbox"/> Hamsters	<input type="checkbox"/> Mouse	<input type="checkbox"/> Rat

Reptiles:		
<input type="checkbox"/> Lizards	<input type="checkbox"/> Turtles	<input type="checkbox"/> Snakes

Miscellaneous:			
<input type="checkbox"/> Ferrets	<input type="checkbox"/> Rabbits	<input type="checkbox"/> Amphibians	<input type="checkbox"/> Arachnids

<input type="checkbox"/> Other (Specify): _____

Will Exotic and/or Nongame Animals as outlined in NJAC 7:25, be available for sales, fostering and or adoption? <input type="checkbox"/> No <input type="checkbox"/> Yes
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TOTAL AMOUNT DUE: \$ _____

STATEMENT

I/We hereby certify that all information provided is correct. I fully understand that any deviation from the information provided without prior approval from the Jersey Shore Regional Health Commission may nullify the final approval.

I further agree to conduct business in compliance with the laws of the state of New Jersey, and local ordinances applicable to the location of establishment as indicated in this application.

Applicant: _____ Date: ____/____/____
Print Name, Title Signature

Note: This application should be submitted completed, along the indicated fee, floor plan, list of build materials, and appropriate license as issued by NJ's Wildlife, Fish and Game department and/or other departments. A more comprehensive list of animals for sale may be requested.

For Office Use Date Received: ____/____/____ Receipt No.: _____ License No: _____ Fee Paid on: ____/____/____