

City of Melbourne
900 East Strawbridge Avenue
Melbourne, Florida 32901



ANIMAL PERMIT APPLICATION

Office of City Clerk
Office: (321) 608-7220
city.clerk@mlbfl.org

Applicant Name: _____

Applicant Address: _____
Address

_____ *City* _____ *State* _____ *Zip Code*

Telephone Number: _____
(During Business Hours) *(Area Code)*

Type of Animal: _____ Quantity: _____

SEE ANIMAL PERMIT GUIDELINES ISSUED BY THE CITY CLERK

SIGNATURE

I, _____, certify that the information I have provided in this application is true and correct; that I agree to adhere to the animal permitting procedures as outlined by the City Code of the City of Melbourne; and that I agree to adhere to the animal permit guidelines issued by the City Clerk.

Signature of Applicant: _____

Date: _____

REQUIRED ATTACHMENT: HAND DRAWN SITE PLAN

Site plan must include a sketch of the house (including the street) indicating the area in which the cage or pen will be located.