

JESSICA E. MIRANDA HAMILTON COUNTY AUDITOR 138 E. COURT STREET, RM 304 **CINCINNATI, OHIO 45202**

OFFICE HOURS MON-FRI: 8:00 AM - 4:00 PM (513) 946-4123 dogs@auditor.hamilton-co.org

INSTRUCTIONS FOR HAMILTON COUNTY KENNEL LICENSES:

ORC 955.02 defines a KENNEL as an establishment that keeps, houses, and maintains adult dogs for the purpose of breeding the dogs for a fee or other consideration received through a sale, exchange, or lease and that is not a high volume breeder.

ON-LINE

Register your kennel on-line at www.doglicenses.us/OH/Hamilton. Only credit card payments accepted; \$3.90 kennel and \$1.00 per extra tag processing fee applies. Please note, processing fees are in addition to the regular licensing rates detailed in #2 below. To access your pre-filled form you will need your Account ID and Password listed below. Log in and return to the homepage to renew.

Account ID: Password:

Males # Females

IN PERSON OR BY MAIL

APPLICATION for the registration of a Kennel for the year 2025

- 1. The numbers reported by breed below should include each dog more than three months of age.
- 2. The \$95 kennel fee includes five individual dog tags. Each additional tag costs \$1 each. Please enclose a check or money order for the correct fee payable to Hamilton County Auditor. DO NOT SEND CASH. After January 31, 2025, the statutory penalty increases the price of each kennel license to \$190. No refunds permitted.
- 3. Please return the application, with the check or money order payment, in the enclosed return envelope. A receipt will be enclosed with your 2025 license tag(s).

Tags may be purchased in person at the Hamilton County Auditor's Office, 138 E. Court St. Room 304, Cincinnati. Please bring the attached form when purchasing tags.

CERTIFICATE OF REGISTRATION AND REGISTRATION TAGS SHALL BE VALID ONLY DURING THE CALENDAR YEAR OR YEARS FOR WHICH THEY ARE ISSUED (ORC SEC 955.09).

Breeds Kept		# Males	# Females		License	# Tags	Fee Paid	Penalty	Total
					Kennel License	5	\$95.00		
					Add'l Tags (optional)		\$1.00 (each)		
					Office Use: 2025 License #s				
Owner Information					The undersigned says that the facts indicated above ARE TRUE.				
Name:					Email:				
Street Address:					Provide an email address to opt in to electronic correspondence regarding dog licensing only.				
Mailing Address: f different(e.g. P.O. Box)					Signature:				
City:	State:	ZipCoc	le:		Date Signed:		Phone #:		

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