



**CITY OF LONGMONT | Planning Division  
Prairie Dog Management Permit Application**

Upon submission of the Prairie Dog Management Permit Application, the City will determine if a minor or major prairie dog management permit is required. Please see the [Prairie Dog Management Overview](#) sheet for more details.

Date of application: \_\_\_\_\_

Applicant (First): \_\_\_\_\_ (Last): \_\_\_\_\_

OR:

Applicant (Company Name): \_\_\_\_\_

Property address where prairie dogs are located (or directions from nearest cross streets):

\_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Parcel Size: \_\_\_\_\_

*If applicable, please list additional addresses, parcel numbers, and parcel sizes:*

1) Address:

\_\_\_\_\_

Parcel Number: \_\_\_\_\_ Parcel Size: \_\_\_\_\_

2) Address:

\_\_\_\_\_

Parcel Number: \_\_\_\_\_ Parcel Size: \_\_\_\_\_

385 KIMBARK STREET | LONGMONT, COLORADO 80501 | T 303-651-8330 | [longmontcolorado.gov](http://longmontcolorado.gov)

Applicant Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Applicant's Email: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_

**Applicant's Preferred Contact Method (for public posting– please check one)**

Email     Phone

Property Owner (if different from applicant):

(First) \_\_\_\_\_ (Last): \_\_\_\_\_

OR, (Company Name): \_\_\_\_\_

Property Owner Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**To be completed by applicant:**

Existing urban development:  Yes  No

Estimated number of prairie dogs: \_\_\_\_\_

Size of Active Prairie Dog Habitat (APDH): \_\_\_\_\_

**Major** → City issues the applicant the relocation forms. \$500 fee is required for the major permit.

**Minor** → This application serves as the permit for prairie dog management.

**What is the intended method of handling the prairie dogs? (Circle One)**

City-approved removal, extermination, donation, or live-trapping

I hereby certify that the information submitted is true and correct. In submitting the signed application, I acknowledge and agree that the application is subject to all the terms and conditions for Prairie Dog Control as defined in [LMC 7.06.20](#). I understand that any false statements or omissions may result in denial or revocation of this permit. I also understand that the City has permission to enter the property, inspect the site, and confirm the active prairie dog habitat size and count.

Applicant Name (Printed): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

**INTERNAL OFFICE USE ONLY**

Approved by (Printed):

Signature:

Date:

Conditions of Approval:

Estimated Invoice Amount (as applicable): \_\_\_\_\_