

Pet Licensing Form

License # _____

Name: _____

Address: _____

Mailing Address: _____

Phone: _____ Email: _____

Pet Information

Pet Name: _____ Species: DOG / CAT

Breed: _____ Color: _____

Age: _____ Is your pet current on his/her rabies vaccination? YES / NO

Before a license can be issued, a copy of your pet's rabies vaccination must be submitted with this form.

Issued: _____/_____/_____

Expires: 12/31/2021

I have read and reviewed ordinance 911 and agree to comply with animal control requirements.

Select one: Altered: \$5.00

Unaltered: \$10.00

Payment type: Check#: _____ Cash Receipt #: _____ CC: (last 4 digits) _____

Owner Signature

Date

Authorized Representative

Date