



DOG AND CAT LICENSE APPLICATION

All dogs and cats over the age of 6 months are required to be vaccinated against rabies and licensed yearly by January 15<sup>th</sup>. Please complete and return this application with a copy of your pet's most recent proof of rabies vaccination to the address above with the appropriate fees. Please do not mail cash.

**Licensing fees**

- \$5 for spayed/neutered pets
- \$10 for unaltered pets
- No charge for residents over the age of 60

Application Year: \_\_\_\_\_

Owner Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Primary \_\_\_\_\_ Alternative \_\_\_\_\_

Email Address: \_\_\_\_\_

Veterinarian name: \_\_\_\_\_

Veterinarian Address: \_\_\_\_\_

Veterinarian Phone Number: \_\_\_\_\_

**Pet #1**

Name: \_\_\_\_\_ Dog ☐ Cat ☐ Male ☐ Female ☐

Has this animal been spayed/neutered? Yes ☐ No ☐

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Date of most recent rabies vaccination: \_\_\_\_\_ Vaccination good for: 1 year ☐ 3 years ☐

**Pet #2**

Name: \_\_\_\_\_ Dog ☐ Cat ☐ Male ☐ Female ☐

Has this animal been spayed/neutered? Yes ☐ No ☐

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Date of most recent rabies vaccination: \_\_\_\_\_ Vaccination good for: 1 year ☐ 3 years ☐

**Pet #3**

Name: \_\_\_\_\_ Dog ☐ Cat ☐ Male ☐ Female ☐

Has this animal been spayed/neutered? Yes ☐ No ☐

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Date of most recent rabies vaccination: \_\_\_\_\_ Vaccination good for: 1 year ☐ 3 years ☐

**For Office Use Only**

Payment Type: \_\_\_\_\_

Receipt #: \_\_\_\_\_