



PET LICENSE APPLICATION

DATE: _____ PHONE#: ____ / ____ / ____

Applicant Name: _____

Street Address: _____

Mailing Address: _____

City : _____ State: _____ Zip : _____

Dog ____ Cat ____ Other _____ (Explain)

Male ____ Female ____ Pets Name _____

Color _____ Breed _____

Cost: \$ 7.00 per Pet. Total Submitted: _____

All Pets are required by City Ordinance # 106 to be licensed in April of every year.

OFFICE USE ONLY BELOW

LICENSE NUMBER:
