



Receipt # _____
Report date _____
Amount Paid _____
By _____

## Pet License

Name of Owner: \_\_\_\_\_

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

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

Name of Pet: \_\_\_\_\_

Type of Pet: \_\_\_\_\_ Breed: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Is Pet Spayed/Neutered?	Yes _____	No _____
Fees:	\$5.00	\$30.00

Give description of Pet (color or markings on body) or attach a photo:

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

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office of the City Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

**\* License must be renewed once a year.**