



## CITY OF DUNNELLON

### ANIMAL LICENSE REGISTRATION FORM

Please Print

DATE:     /     /

NAME OF OWNER: \_\_\_\_\_

TYPE OF ID SHOWN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_                      WORK PHONE: \_\_\_\_\_

CONTACT PERSON (OTHER): \_\_\_\_\_

PHONE: \_\_\_\_\_

NAME OF ANIMAL: \_\_\_\_\_

Please Circle one:

SEX:                      MALE              FEMALE

ALTERED:              YES              NO

TYPE OF ANIMAL:      CAT              DOG              OTHER: (if other please specify) \_\_\_\_\_

NAME OF BREED OR MIX: \_\_\_\_\_

AGE: \_\_\_\_\_              WEIGHT: \_\_\_\_\_

COLOR OF COAT: \_\_\_\_\_

CITY RECEIPT #

CITY TAG #

CUSTOMER #

ANIMAL #