



# CITY OF CHANUTE PET LICENSE CERTIFICATE

(Not to be used for Pit Bull dogs)

Expires \_\_\_\_\_

p. \_\_\_\_ / \_\_\_\_

First Letter of Last Name \_\_\_\_\_

A license is required for all cats or dogs over six months of age. Please fill out all appropriate fields for each pet to be licensed. Include proof of current rabies immunization and spay/neuter verification.

Owner's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Last Name First Name M.I.

Address: \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_  
Street, City, State, Zip

Existing City License #: \_\_\_\_\_ New tag needed? \_\_\_\_\_ NEW LICENSE NUMBER: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Approx Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Spay/Neuter? \_\_\_\_\_

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

Rabies Immunization expires: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Veterinarian: \_\_\_\_\_ Microchip #? \_\_\_\_\_

Existing City License #: \_\_\_\_\_ New tag needed? \_\_\_\_\_ NEW LICENSE NUMBER: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Approx Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Spay/Neuter? \_\_\_\_\_

Primary Breed: \_\_\_\_\_, Color: \_\_\_\_\_

Rabies Immunization expires: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Veterinarian: \_\_\_\_\_ Microchip #? \_\_\_\_\_

Existing City License #: \_\_\_\_\_ New tag needed? \_\_\_\_\_ NEW LICENSE NUMBER: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Approx Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Spay/Neuter? \_\_\_\_\_

Primary Breed: \_\_\_\_\_, Color: \_\_\_\_\_

Rabies Immunization expires: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Veterinarian: \_\_\_\_\_ Microchip #? \_\_\_\_\_

I certify that none of these animals are Pit Bull or Pit Bull mix dogs as defined by ordinance #6.04.130. I also certify that the information on this form is true and accurate to the best of my knowledge, and that falsification of any information may result in revocation of this license and/or any applicable charges. In the event that my pet is found, I give permission for my contact information to be given to the finder for the purpose of returning the pet to me. I understand that this certificate must be kept for the duration of the license period and must be presented to the Animal Control Officer upon request.

\_\_\_\_\_  
Pet Owner

\_\_\_\_\_  
Date

(For office use only)

Date: \_\_\_\_\_

Y/N Senior (over 65)

# of Months Late: \_\_\_\_\_

Total Fees \$ \_\_\_\_\_

\_\_\_\_\_  
Chanute City Clerk's Office

Revised 9/12/11