## Washoe County Regional Animal Services Dog License Form

To obtain additional forms you can go online to **washoe.docupet.com/offline** or email us at **info@docupet.com**.



East Syracuse NY 13057

Unless otherwise specified, this form must be completed in its entirety.

| Cont |  |  |
|------|--|--|
|      |  |  |
|      |  |  |
|      |  |  |

| First Name   |                      | Last Nam    | Last Name           |   |   | Email Address (Optional) |                        |                  |        |       |          |          |
|--|----------------------|-------------|---------------------|---|---|--------------------------|------------------------|------------------|--------|-------|----------|----------|
| Telephone  |                      | Phone Ty    | Phone Type          |   |   | DC                       |                        | OB (MM/DD/YYYY)  |        |       |          |          |
|  |                      | ○ Home      | ○ Home ○ Mobile ○   |   | ) Work  |                          |                        |                  |        |       |          |          |
|  |                      | *Ор         | tional              |   |   |                          |                        |                  |        |       |          |          |
| Mailing Addres   | SS                   |             |                     |   |   |                          |                        |                  |        |       |          |          |
| Street #   | Street               | Street Name |                     |   |   | Unit (                   |                        |                  | City   |       | ZIP Code |          |
| If your mailing  | address is           | not th      | ne the physica      | l address f   | or your   | pet,                     | comple                 | ete th           | e Phys | sical | Address  | section. |
| Physical Addre   | ess                  |             |                     |   |   |                          |                        |                  |        |       |          |          |
| Street #   | Street               | Street Name |                     |   |   | Uni                      | it                     | Ci               | .y     |       |          | ZIP Code |
| Dog Information  | on                   |             |                     |   | '   |                          |                        |                  |        |       |          |          |
| Dog's Name Dog's Br  |                      |             | eed                 |   |   |                          | Dog's DOB (MM/DD/YYYY) |                  |        |       |          |          |
| Sex S <sub>I</sub>   |                      | Spayed/Neu  | payed/Neutered Micr |   | ochipped  |                          |                        | Microchip number |        |       |          |          |
| ○ Male ○ Female ○  |                      |             | ○ Yes (             | ○ Yes ○ No ○ Y  |   |                          | Yes O No               |                  |        |       |          |          |
| Color  | or Veterinary Clinic |             |                     | Tag Size  ○ Small (0.86 inches) ○ Large (1.25 inches)   |   |                          |                        |                  |        |       |          |          |
| License Type   | <u>;</u>             |             |                     |   |   |                          |                        |                  |        |       |          |          |
| <ul><li>○ Altered Dog - 1 Year \$16.00</li><li>○ Altered Dog - 3 Year \$48.00</li><li>○ Unaltered Dog - 1 Year \$30.00</li></ul> |                      |             |                     | <ul><li>Unaltered Dog - 3 Year \$90.00</li><li>Senior Rate: Altered Dog - 1 Year \$8.00</li><li>Senior Rate: Altered Dog - 3 Year \$24.00</li></ul> |   |                          |                        |                  |        |       |          |          |
| Payment & Do   | nation               |             |                     |   |   |                          |                        |                  |        |       |          |          |
| Yes! I want to help more pets in my community find want to make a donation of \$5 \cap \$10 \cap \$                              |                      |             |                     |   |   |                          |                        | eceived \$       |        |       |          |          |
| Payment Typ  | oe 🔾 C               | heck        |                     |   |   |                          |                        |                  |        | ,     |          |          |
| Who do I make a check out to? Please make checks payable to DocuPet  |                      |             |                     |   | Where do I mail this form? DocuPet 15 Technology Pl Suite 1 |                          |                        |                  |        |       |          |          |

## **Required Documentation**

If you are licensing a new or recently spayed or neutered dog, you must also provide a spay/neuter certificate. Note that document submissions will not be mailed back to you.