



CITY OF MUKILTEO

Police Department

DOG LICENSE APPLICATION

OWNER NAME: _____

(PLEASE PRINT)

HOME PHONE #: _____ WORK PHONE #: _____

STREET/MAILING ADDRESS _____

(STREET)

(CITY)

(ZIP)

ALTERNATE/EMERGENCY CONTACT NAME: _____

PHONE #: _____

NOTE: IN THE EVENT THAT YOUR ANIMAL SHOULD BE PICKED UP BY THE ANIMAL CONTROL OFFICER, WE ASK THAT YOU ASSIST THE CITY OF MUKILTEO IN RETURNING YOUR ANIMAL TO YOUR HOME, RATHER THAN TO PAWS, BY PROVIDING THE NAME OF A NEIGHBOR OR RELATIVE WHO MAY BE ABLE TO HOLD YOUR ANIMAL UNTIL YOU HAVE RETURNED HOME.

DOG INFORMATION

NAME: _____ BREED: _____

SEX: _____ COLOR: _____

IS YOUR DOG SPAYED/NEUTERED?: _____ DATE OF LAST INOCULATION: _____

(MUST SUBMIT PROOF, IF APPLICABLE)

(PROOF OF RABIES INOCULATION REQUIRED)

MICROCHIP BRAND: _____ MICROCHIP #: _____

NAME OF VETERINARIAN: _____

PHONE NUMBER: _____

I AM THE OWNER OF THE ABOVE LISTED DOG AND TAKE FULL RESPONSIBILITY

OWNER'S SIGNATURE: _____ DATE: _____

DRIVER'S LICENSE NUMBER: _____

FEE SCHEDULE

Type of Dog License Purchased

Spayed or Neutered Dog

Unaltered Dog

Lifetime License

\$40.00

\$80.00

*****For Official Use Only*****

Application Received Date: _____

License # Issued: _____

Amount of Fee: _____

Issued By: _____

Receipt #: _____