



<b>Name of Owner</b>			
<b>Owner's Mailing Address</b>			
<b>Physical Address</b>			
<b>Email Address</b>			
<b>Telephone Day</b>		<b>Telephone Evening</b>	
<b>Cell Phone</b>			
<b>Animal #1's Name</b>		<b>Animal Type ( dog / cat )</b>	
<b>Animal Breed</b>			
<b>Check One</b> Male <input type="checkbox"/> Female <input type="checkbox"/>	<b>Check One</b> Spayed <input type="checkbox"/> Neutered <input type="checkbox"/> Neither <input type="checkbox"/>		<b>Color(s)</b>
<b>Microchip #</b>			
<b>Rabies Tag No.</b>	<b>Vaccine Date</b>	<b>Expiration Date</b>	<b>Name of Veterinarian Office</b>
<b>Animal License Fee</b>	<b>Unsterilized Animal</b>		<b>Sterilized Animal</b>
1 Year License	\$10.00		\$5.00
<b>Payment at City Hall by:</b> Check <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Cash <input type="checkbox"/>			
<b>Animal #2</b>			
<b>Name</b>		<b>Animal Type ( dog / cat )</b>	
<b>Animal Breed</b>			
<b>Check One</b> Male <input type="checkbox"/> Female <input type="checkbox"/>	<b>Check One</b> Spayed <input type="checkbox"/> Neutered <input type="checkbox"/> Neither <input type="checkbox"/>		<b>Color(s)</b>
<b>Microchip #</b>			
<b>Rabies Tag No.</b>	<b>Vaccine Date</b>	<b>Expiration Date</b>	<b>Name of Veterinarian Office</b>

Complete application and a check made out to City of Palm Coast  
160 Lake Avenue — Suite 141 — Palm Coast, FL 32164

**PLEASE ATTACH A COPY OF YOUR PET'S CURRENT RABIES VACCINATION CERTIFICATE!**

If proof of sterilization is not available (usually notated on rabies certificate), complete affidavit on back of this license application. Animal Control will mail a license tag to you following the processing of your application. Animal license fees are shown above.

**Animal #3**

Animal's Name		Animal Type (dog/cat)	Animal Breed
Check One Male <input type="checkbox"/> Female <input type="checkbox"/>	Check One Spayed <input type="checkbox"/> Neutered <input type="checkbox"/> Neither <input type="checkbox"/>	Color(s)	Microchip #
Rabies Tag No.	Vaccine Date	Expiration Date	Name of Veterinarian Office
License Fee (Spayed/Neutered) \$5.00		(Not spayed/neutered)	\$10.00

**Animal #4**

Animal's Name		Animal Type (dog/cat)	Animal Breed
Check One Male <input type="checkbox"/> Female <input type="checkbox"/>	Check One Spayed <input type="checkbox"/> Neutered <input type="checkbox"/> Neither <input type="checkbox"/>	Color(s)	Microchip #
Rabies Tag No.	Vaccine Date	Expiration Date	Name of Veterinarian Office
License Fee (spayed/neutered) \$5.00		(Not spayed/neutered)	\$10.00

**Animal License Tag**

Animal License Tags shall be affixed to a collar or harness, and must be worn by the animal at all times when off the owners premises. If you find an animal with a City of Palm Coast tag, please telephone your local Animal Control for information on reuniting the lost animal with its owner. We may be reached at 386-986-2520.

**Be a Responsible Pet Owner**

1. License your dog/cat
2. Have your animal spayed or neutered
3. Vaccinate your animal against rabies and other diseases
4. Keep your animal on a leash
5. Clean up after your animal
6. Train your dog not to bark excessively

**NOTARIZED AFFIDAVIT**

**Only if Spayed or Neutered information is not available**

Being duly sworn, says:

I reside at the address and am the owner of the animal(s) indicated on this license application.

This animal was spayed/neutered or examined and found to be spayed/neutered by

Dr. \_\_\_\_\_, at \_\_\_\_\_, on \_\_\_\_\_.

This Affidavit is made to obtain a license for animal(s) #1 #2 #3 #4 listed on this form.

\_\_\_\_\_  
Applicant Signature

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public (stamp & signature)

**Notaries available at City Hall**