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| Town ofWilson’s Mills |
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**ANIMAL LICENSE APPLICATION**

*ALL BLANKS MUST BE COMPLETED ACCURATELY*

Animal Owner’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drivers License or other I.D.# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical address of where animal will be located: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address if different from above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone(s) ( ) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_ Work/Cell/Other ( ) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_

(Circle one)

Pets name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_

Dog or Cat Sex M / F Spayed or Neutered? Y / N

(Circle one) (Circle one) (Circle one)

Primary breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ other breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Colors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RABIES TAG #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expiration date\_\_\_\_/\_\_\_\_/20\_\_\_\_ Issue date\_\_\_\_/\_\_\_/20\_\_\_\_**

Other identification (such as microchip)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Reason for fee exemption*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Animal I.D. #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Such as service animal)*

**Complete 1 application and payment ($5.00 for dog & $3.00 for cat) per animal and mail or deliver to:**

**Town of Wilson’s Mills Animal Control Dept.**

**P.O. Box 448 Wilson’s Mills, N.C. 27593-0448**

* ***A copy of the pets current Rabies certificate MUST ACCOMPANY THIS APPLICATION.***
* ***Proof of pet being Spayed / Neutered MUST ACCOMPANY THIS APPLICATION.***
* ***A picture of the pet MUST ACCOMPANY THIS APPLICATION.***

*(If you bring the animal to Town Hall a picture will be taken there at no charge.)*

Animal owners’ signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LICENSE TAG #

*By signing this document you confirm ownership of said animal* \_\_\_\_\_\_\_\_\_\_\_\_\_\_

For office use ONLY

Person issuing permit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_