



Pet License



Pet Owner Information

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact Name and Phone number: _____

Veterinarian Name and Phone number: _____

Pet #1 Information

Name: _____ Primary color: _____ Weight: _____ Breed: _____

Male/Female
(circle one)

Dog/Cat
(circle one)

Altered? Yes/No
(circle one)

Mixed Breed? Yes/No
(circle one)

Date of Birth or approx. age: _____ Microchip number: _____

Rabies Vaccine: vaccination date: _____ expiration date: _____

License #

Pet #2 Information

Name: _____ Primary color: _____ Weight: _____ Breed: _____

Male/Female
(circle one)

Dog/Cat
(circle one)

Altered? Yes/No
(circle one)

Mixed Breed? Yes/No
(circle one)

Date of Birth or approx. age: _____ Microchip number: _____

Rabies Vaccine: vaccination date: _____ expiration date: _____

License #

Pet #3 Information

Name: _____ Primary color: _____ Weight: _____ Breed: _____

Male/Female
(circle one)

Dog/Cat
(circle one)

Altered? Yes/No
(circle one)

Mixed Breed? Yes/No
(circle one)

Date of Birth or approx. age: _____ Microchip number: _____

Rabies Vaccine: vaccination date: _____ expiration date: _____

License #

Your license application will not be complete without:

1. Current copies of Rabies Vaccinations status
2. Proof of Spay/Neuter if receiving an altered license
3. License fee. (Fees are \$15 per year for altered pets. Unaltered pets \$30 per year)

Mail or take license application to:

Monroe Police Department
818 W. Main Street
Monroe, WA 98272