

CITY OF DORRIS APPLICATION FOR DOG LICENSE

Pack License Permit REQUIRED FOR 4 or more dogs

DATE _____

NAME _____

PHYSICAL ADDRESS _____

MAILING ADDRESS _____

TELEPHONE NUMBER _____

OWNERS SIGNATURE _____

	Dog 1	Dog 2	Dog 3	Dog 4
NAME				
BREED				
COLOR				
MALE/FEMALE				
SPAYED/NEUTERED				
RABIES NO.				
EXPIRES				

OFFICIAL CITY USE ONLY

2019-2020 License No. _____

Date _____ Fee _____

By _____ Check # or Cash _____

City Clerk/Deputy Clerk