

# CITY OF ABERDEEN MAIL IN PET LICENSE APPLICATION

**360-537-3382**

## Mandatory documentation

- Copy of current rabies vaccination certificate

## Other documentation for discounts

- Spay or neuter certificate or other valid veterinary record

## MAILING ADDRESS:

Aberdeen Animal Control  
409 S. Monroe Street  
Aberdeen, WA 98520

Please make check/money order out to City of Aberdeen

**NO CASH ACCEPTED**

LICENSE FEES	ANNUAL	LIFETIME
1. DOG ( <i>spay or neutered</i> )	\$5.00	\$30.00
2. DOG ( <b>NOT</b> <i>spay or neutered</i> )	\$25.00	(Not Available)
3. CAT ( <i>Spay or neutered</i> )	\$3.00	\$25.00
4. CAT ( <b>NOT</b> <i>spay or neutered</i> )	\$15.00	(Not Available)
5. SERVICE ANIMAL –Call Animal Control for Verification		<b>FREE</b>

Applicant's Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Species: *circle* (Dog) (Cat)

Telephone: \_\_\_\_\_

Breed: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

Color: \_\_\_\_\_

Rabies expiration date: \_\_\_\_\_

Age of pet: \_\_\_\_\_

Animal's Microchip # \_\_\_\_\_

Sex: *circle* (M) (Mn) (F) (Fs)

I certify that all the above information I provided to be true and accurate. I understand that any false statements made on this application pertaining the current Rabies vaccination of my pet are subject to prosecution under AMC 6.04.100 and is punishable by a monetary fine of \$250.00.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_