## **City of Blaine Pet License Form**

To obtain additional forms you can go online to whatcomhumane.docupet.com/blaine/offline or email us at info@docupet.com. Unless otherwise specified, this form must be completed in its entirety.



East Syracuse NY 13057

Contact I	nformation											
First Name					Last N	Last Name						
Email Addr	ess (Optional: required	for online account a	nd electronic ı	renewal remin	ders)							
Telephone P			Phone Type			*DOB (MM/			/DD/YYYY)			
○ Home ○ M					-							
							*C	Optional				
Mailing A	ddress											
Street Number	Street Name	Street Name				Unit or Cit Apartment				ZIP Code		
If your mailing  Physical A	address is not the phys	sical address for you	ır pet, you mı	ust complete	the Physical <i>I</i>	Address	section belov	v.				
Street Number	Street Name					Unit or Apartment		City			ZIP Code	
Pet Inforr	nation							'				
Pet's Name					Pet's Breed				Pet's DOB (MM/DD/YYYY)			
Sex Spayed/Neute			red Microchipped			If yes, provide microchip number						
○ Male ○ Female ○ Yes ○		No	○ Yes ○ No									
Color Veterinary Clinic					Tag Size  ○ Small (0.86 inches) ○ Large (1.25 inches)							
License Type  O Altered Dog License \$11.00						○ Unaltered Dog License \$41.00						
Payment	& Donation											
Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of  \$\infty\$ \$10 \$\infty\$ \$25 \$\infty\$ \$50 \$\infty\$ \$100 \$\infty\$ \$250								a a	Sum Received			
Payment Type  Check												
Who do I make a check out to? Please make checks payable to DocuPet.						Where do I mail this form? DocuPet 15 Technology PI Suite 1						

## **Required Documentation**

You are required to provide a copy of your pet's rabies certificate. If you are licensing a new or recently spayed or neutered pet, you must also provide a spay/neuter certificate. Note that document submissions will not be mailed back to you.