

711 Main Street Grain Valley, MO 64029 816.847.6250 816.847.6259 fax www.cityofgrainvalley.org

Animal License Form

The applicant must fill out **ALL** highlighted sections. Print clearly and legibly in blue or black ink—no pencil. Please read all conditions on this application before signing. The animal owner must sign and date the application. If not applicable, please write N/A (do not leave blank). When filling out addresses, please include St, Ave., Rd., Dr., etc. and zip code. **Applicant must attach proof of current rabies vaccination for each animal**. Maximum number of animals allowed per household is FOUR (4).

Owner's Name:	Owner's Date of Birth:			
Telephone #: ()	Cell #: (Work #: (
Address:		City, State, Z	ip:	
Email:			_ Driver's License #:	
Emergency Contact Name:				
	ANIMAL ONE	ANIMAL TWO	ANIMAL THREE	ANIMAL FOUR
ANIMAL'S NAME:				
BIRTH MONTH / YEAR:				
GENDER:	M / F	M / F	M / F	M / F
SPECIES:	DOG / CAT/ OTHER:	DOG / CAT/ OTHER:	DOG / CAT/ OTHER:	DOG / CAT/ OTHER:
BREED:				
COLOR(S) AND UNIQUE IDENTIFIER(S):				
SPAYED or NEUTERED:	YES / NO	YES / NO	YES / NO	YES / NO
VET CLINIC:				
VET CLINIC'S PHONE # AND ADDRESS:				
RABIES VACCINE EXPIR. DATE:				
RABIES TAG #:				
MICROCHIP #:				
understand that all animal tag inimal licenses renewed after F ee. The licenses obtained toda enew pet licenses will result in Signature:	February 1st deadline. L y will be valid until Fe	icenses obtained after the bruary 1st of the next c	ne February 1st deadline	will be assessed a \$10 l
	то ве со	MPLETED BY CITY	STAFF	
LICENSE COST:	\$10.00	\$10.00	\$10.00	\$10.00
LICENSE NUMBER:				
			_	
RENEWAL:	YES / NO	YES / NO	YES / NO	YES / NO
RENEWAL:	1		YES / NO Payment Stamp:	YES / NO
	Water Dept. Initial		I.	YES / NO