

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:			
Геlephone #: ()	Cell #: () Work #: ()			
Address:		City, State, Z	ip:	
Email:			Driver's License #:	
Emergency Contact Name:	Telephone #: ()			
	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 #:				
I understand that all animal tag animal licenses renewed after M The licenses obtained today wil	March 1st deadline. Lice Il be valid until Februar	enses obtained after the ry 1st of the next calendary	March 1st deadline will l	be assessed a \$10 late f
	mons to municipal cour	t.	Date:	
		OMPLETED BY CITY		
				\$10.00
Signature:	то ве со	MPLETED BY CITY	STAFF	\$10.00
Signature:LICENSE COST:	то ве со	MPLETED BY CITY	STAFF	\$10.00 YES / NO
LICENSE NUMBER:	TO BE CO \$10.00 YES / NO	\$10.00 YES / NO	STAFF \$10.00	,
LICENSE COST:  LICENSE NUMBER:  RENEWAL:	TO BE CO \$10.00  YES / NO Water Dept. Initial:	\$10.00 YES / NO	\$10.00 YES / NO	,