

CITY OF DULUTH CITY CLERK'S OFFICE

330 City Hall ● 411 West First Street Duluth, Minnesota 55802-1189 Phone (218) 730-5500

Phone (218) 730-5500 Fax (218) 730-5923

name below. I request my data to be considered private.

Signature

Type in your information by tabbing through the boxes below.

Print, sign (if applicable) and submit this applicant to the address above.

			, , ,	••								
PET LICENSE APPLICATION January 1 to December 31												
LICENSE TYPES (CHECK ONE) INCLUDE THAT AMOUNT IN A CHECK OR MONEY ORDER WITH APPLICATION												
	Annual co			\$10.	.00	Lifetime - compliant				\$60	0.00	
	Annual altered non-complia				\$25.00 Lifetime - 0			e - change of o	change of owner			5.00
	Annual unaltered				\$75.	.00	Service Animal				Fre	е
	Duplicate tag				\$5.00 IMPORTANT! Please note that emotional support qualify as service animals for purposes of animals					port anir imal licen	mals d ising.	lo no
OWNER INFORMATION												
NAME(S)												
ADDRESS												
PHONE												
					PET IN	NFORMA	ATION					
SPECIES			DOG		CAT							
NAME							SEX		AGE			
BREED							COLOR					
SPAY/NEUTER INFORMATION												
SPAYED/NEUTERED? (Y/N)					DATE							
VET OR VET CLINIC NAME												
NOTE: If pet has been spayed or neutered, include the certificate with this application. It will be returned with the license.												with
RABIES VACCINATION INFORMATION												
VACCINATION DATE						EXP	IRATION D	ATE				
VET OR VET CLINIC NAME												
NOTE	: Include	the Rab	ies Certifi	cate wi	th this app	lication.	It will be re	eturned with the	e license			
PRIVACY NOTICE: The information you listed above is classified by the State of Minnesota as PUBLIC												
								by the State o to be kept pri				

Date