

City of Glyndon

Minnesota



City Council:

Mayor Joe Olson
Shonna Severson
Bryant DeVries
Patrick McCoy
Steven Ring

PET LICENSE APPLICATION

PET'S NAME: _____

LICENSE NUMBER ISSUED: _____

DOG:

Male: _____

Neutered Male: _____

Female: _____

Spayed Female: _____

CAT:

Male: _____

Neutered Male: _____

Female: _____

Spayed Female: _____

BREED: _____

WEIGHT: _____

COLOR: _____

VET USED: _____

VACCINATION RECORDS PRESENTED: Y _____ N _____

RABIES EXPIRES: _____

(Rabies vaccination record must be provided and up to date before a license can be issued)

OWNER'S NAME: _____

ADDRESS: _____ PHONE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

OFFICE USE ONLY

FEE: \$6.00

METHOD OF PAYMENT: Cash _____ Check No. _____ Card _____

TAG EXPIRES: _____

APPROVED BY: _____