Dog License Form



To obtain additional forms you can go online to **crgov.docupet.com/offline** or email us at **info@docupet.com**. This form can be mailed to info@docupet.com or brought in by person to docuPet.

Address & Contact Information

First Name					Last N	Last Name				
Email Address (required for	online account)									
Street Number	Street Name									
Unit or Apartment	Zip Code			Telephone				Cellphone		
Dog Informatio	n									
Dog's Name		Dog Breed				Dog D	Dog DOB (MM/DD/YYYY)		Rabies Expiration (MM/DD/YYYY)	
Gender		Spayed/Neute	red	Mic	Microchipped			If yes, provide	microchip number	
○ Male ○ Female		○ Yes	es O No) Yes	○No				
Color		Veterinary Clinic				Tag Ty	pe			
						05	○ Small (0.88 inches) ○ Large (1.18 inches)			
License Cost Altered- 1 Year \$10.00 Altered- 3 Year \$30.00 Payment & Donation						○ Unaltered- 1 Year \$20.00○ Unaltered- 3 Year \$60.00				
Payment & Dor	iation									
Yes! I want to help more per \$10 \$20	· .	y find a safe and	d happy home. I want to r	nake a dona	ation of					
Payment Type by Mail						Amount Received				
○ Cash ○ Check						\$				
Where do I mail to DocuPet 15 Technology P Suite 1 East Syracuse NY		Who do I make a check o Please make checks payal					ocuPet			
					s Proo	Proof of rabies vaccination Proof of a valid rabies vaccination for your dog is required to license.				
Dog Owner Signature					Date					