## MONROVIA DOG/CAT LICENSE APPLICATION





Pet's Name:	□ Dog	☐ Cat Age: Years	S Months (must be 4 months of	age to be licensed)
Primary Breed:	Pure	Breed Mixed Breed	Secondary Breed:	
Color: Mar		kings:		
Microchip #:				
Size: □Small □Medium □Lar	ge Please check one: 🔲 Fe	emale (not spayed)	nale Spayed Male (not neutered)	☐ Male Neutered
Veterinarian (Name & Phone #):				
PET OWNER INFORMATION	N (Please use address where pe	et will be kept)		
wner's First Name: Last Name		Home Phone:		
Address Where Pet Will Reside:		Cell Phone:		
City: Monrovia State: CA Zip Code:	E	mail Address:		
EMERGENCY CONTACT IN	FORMATION			
First Name: Last Name:		Phone Number:		
PAYMENT INFORMATION	The Enclosed Payment is	for a: New License	-or- ☐ License Renewal	
<ul> <li>You must submit a copy of a current rab application. Rabies vaccination certificathe license period.</li> </ul>		Resident	\$60 (Dog Unaltered) \$20 (Spayed/Neutered)	\$
<ul> <li>If applying for spay/neuter discount on a new license, you must submit a certificate of sterility.</li> <li>License period is for 1, 2 or 3 years from date of issue depending on rabies certificate.</li> <li>Licenses are issued only to individual persons.</li> <li>** If applying for a low income license, please submit a copy of your utility bill that shows your participation in Edison's C.A.R.E or AT&amp;T's "Lifeline" programs. You must also provide proof of age (62 or older), or handicap, and proof that the dogs is spayed or neutered.</li> </ul>			\$10 (Cat Unaltered) \$5 (Spayed/Neutered)	\$
		Low Income Program**	No Charge	\$
		Late Penalty Fee (Applies after the expiration date)	Half of the license fee	\$
		Yes, I would like to give a voluntary donation* in the amount of		\$
due IN PERSON OR BY MAIL. To pay IN PERSON, you may pay with cash, check, money order, American Express, VISA, or MASTERCARD and most ATM cards, in our of office during regular business hours.			TOTAL	\$
We accept cash, check, money order, Am credit card only. <b>Please make your chec</b> l PRINT all information requested on this	k or money order payable to Pas	sadena Humane. Two part	' '	,
Card holder name			ican Express Mastercard Exp.	Date
Credit Card #	Autho	orized Signature		Date
I declare under penalty of perjury t	hat the foregoing information	on is true and correct.		
Signature:			Date:	

Submit a completed copy of this form and payment in person, by mail, by fax or via email to: Pasadena Humane, Attn: Licensing Dept, 361 S. Raymond Ave., Pasadena, CA 91105 Email: licensing@pasadenahumane org · Fax: 626.993.1976 · Questions? Call 626.792.7151 x115

Your pet's license tag is permanent. You will not receive a new license tag with renewals.