

Pet Licensing Application For City of Poulsbo



	nore than five (5)	dogs o	r cat	s or any c	ombina	tioi	n there			y for lost tag e kept on a	•	mily dwellin	g.	
Date														
Own	er Name													
Primary Phone Number						E-Mail Address								
Phys	sical Address													
City						State						Zip		
Mailing Address														
City					State	State					Zip			
Pet Name		Dog or Cat	Primary C Breed		Color		Gender M/F)	Spay/ Neutered (Y/N)		Microchip Number		License Type/ID Number (ID #)	Fee	
						+								
						+								
ID#	LICENSE TYPE			1 YEAR	LIFETIME	:	SENIOR CITIZEN (65+) LIFETIME		DISABLED AND LOW-INCOME LIFETIME		Total License Fee Amount			
001	Dog - Spayed/neutered			\$12.00	\$40.00		\$6.00		\$6.00		Spay Neuter Suggested Donations of \$5.00			
002	Dog - NOT spayed/neutered		\$35.00	Not Availa	ble Not Availab		lable	Not Available		ed Donation (Optional)	s of \$5.00			
003	Cat - Spayed/neutered			\$7.00	\$25.00	25.00 \$3.00			\$3.00		_	D. Daw Late		
004	Cat - NOT spayed/neutered			\$35.00	Not Availa	Not Available Not Availal		lable	Not Available		Late Fee for 30 Renewals: \$5.	_		
005	Service Dog (No therapy or emotional support)			Not Available	No Fee	No Fee Not Availa		lable	Not Available		Processing Fee for all \$3		\$ 3.00	
006	Replacement Tag - Current licenses only				\$3.00	\$3.00 \$3.00		\$3.0	00	New and Renewed Licenses				
	day and I Dec	2.11									Total Amo	unt		

Register and Pay Online: www.kitsap-humane.org

In Person or by Mail:

Kitsap Humane Society 9167 Dickey Road NW Silverdale, WA 98383

Questions or Assistance:

petlicensing@kitsap-humane.org 360-692-6977 X1134

Make Checks Payable to **Kitsap Humane Society**



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SPAY/NEUTER AFFIDAVIT (required for S/N license fee)

I certify that the animal(s) named has/have b	peen surgically altered by a licensed veterinarian.
Owner's Signature	
RABIES VACCINATION AFFIDAVIT	(required)
Washington State law (WAC 246-100-197) listed here has current rabies vaccination de	requires all pet dogs and cats to be current on their rabies vaccinations. I verify that the pet ocuments.
Date vaccinated	Rabies tag #
Owner's Signature	
SERVICE DOG FEE WAIVER AFFID	AVIT
an individual in the household with a disabili	service dog is one that is specifically trained to do work or perform tasks for the benefit of ty. The task(s) performed by a service dog must be directly related to the handler's disability sing, depression relief, protection, or companionship DO NOT constitute work or tasks for
To qualify for the pet license fee waiver,	you must truthfully answer the following questions and sign below.
Is the dog a service dog, and requi What work or task has the dog bee	
	itions of 'disability' and of 'service dog'. I further understand that it is against the law to mise dog in question meets the requirements for fee waiver.
Owner's Signature	Date
SENIOR CITIZEN AFFIDAVIT	
l attest that I am 65 years or older and my petime pet license(s).	et(s) have been spayed or neutered; therefore I qualify to purchase the Senior Citizen Life-
Owner's Signature	
AFFIDAVIT FOR CITIZENS WHO A	RE DISABLED AND LOW INCOME
	City of Poulsbo for both disability and low income, and that my pet(s) have been spayed or "Citizens Who Are Disabled and Low Income" Lifetime pet license.
Owner's Signature	