

Pet Licensing Application For City of Poulsbo



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	er Name														
Primary Phone Number							E-Mail Address								
 Phys	sical Address														
City							State						Zip		
 Maili	ng Address														
City					State					Zip					
Pet Name/Age		Dog or Cat	or Breeds (Primary/ Secondary)		Со	olor	Gender (M/F)		Spay/ Neutered (Y/N)		Microchip	Number	License Type/ID Number (ID #)	Fee	
D#	LICENSE TYPE			1 YEAR		LIFETIME	:	SENIO			ABLED AND	Total Licens	se Fee		
								LIFETI	EN (65+) IME	LOW-INCOME LIFETIME		Amount			
01	Dog - Spayed/Neutered	d		\$12.00		\$40.00		\$6.00		\$6.00		Spay Neuter Suggest- ed Donations of \$5.00			
002		og - NOT Spayed/Neutered		\$35.00	Not Availa		ible Not Av		ailable Not		: Available	(Optional)			
003	Cat - Spayed/Neutered		\$7.00		\$25.00		\$3.00		\$3.00		_	30+ Day Late			
004	Cat - NOT Spayed/Neutered		\$35.00		Not Available		Not Available		Not Available		Renewals: \$5	_			
005	Service Dog (No Therapy or Emotional Support)			Not Available		No Fee		Not Available		Not Available		Processing New and Re		\$ 3.	
006	Replacement Tag - Current Licenses Only \$3.0			\$3.00	\$3.00		\$3.00		\$		00	Licenses			

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 been	n surgically altered by a licensed veterinarian.
Owner's Signature	
RABIES VACCINATION AFFIDAVIT (R	equired)
Washington State law (WAC 246-100-197) requisted here has current rabies vaccination docu	uires all pet dogs and cats to be current on their rabies vaccinations. I verify that the pet ments.
Date vaccinated	Rabies tag #
Owner's Signature	
SERVICE DOG FEE WAIVER AFFIDAV	IT
an individual in the household with a disability. T	vice dog is one that is specifically trained to do work or perform tasks for the benefit of The task(s) performed by a service dog must be directly related to the handler's disability 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 required What work or task has the dog been tr	
	ns of 'disability' and of 'service dog'. I further understand that it is against the law to misg in question meets the requirements for fee waiver.
Owner's Signature	Date
SENIOR CITIZEN AFFIDAVIT	
I attest that I am 65 years or older and my pet(s) time pet license(s).) have been spayed or neutered; therefore I qualify to purchase the Senior Citizen Life-
Owner's Signature	
AFFIDAVIT FOR CITIZENS WHO ARE	DISABLED AND LOW INCOME
I attest that I meet the requirements set by City neutered; therefore I qualify to purchase the "Ci	of Poulsbo for both disability and low income, and that my pet(s) have been spayed or tizens Who Are Disabled and Low Income" Lifetime pet license.
Owner's Signature	