

ANIMAL LICENSING APPLICATION

Name of Owner:

Owner's Mailing Address:

Physical Address:

Email Address:

Telephone Number:

Day-

Night-

***PLEASE ATTACH A COPY OF YOUR PET'S CURRENT RABIES VACCINATION CERTIFICATE!**

If proof of sterilization is not available (usually noted on rabies certificate), complete the affidavit at the end of this license application. Animal Control will mail a license tag to you following the processing of your application. Animal License fees are shown below. Payments may be made by credit card, check or with cash in person at City Hall.

A complete application and payment made to City of Palm Coast 160 Lake Ave. Palm Coast, FL 32164.

Animal License Fee for one year for each animal:

\$35.00 unsterilized animal

\$25.00 sterilized animal

Animal Number 1 Name:

Animal Type-dog or cat:

Animal Breed:

Male or Female:

Spayed, Neutered, or Neither:

Color(s) of Animal:

Microchip Number:

Rabies Tag Number:

Vaccine Date:

Expiration Date:

Name of Veterinarian Office:

Animal Number 2 Name:

Animal Type-dog or cat:

Animal Breed:

Male or Female:

Spayed, Neutered, or Neither:

Color(s) of Animal:

Microchip Number:

Rabies Tag Number:

Vaccine Date:

Expiration Date:

Name of Veterinarian Office:

Animal Number 3 Name:

Animal Type-dog or cat:

Animal Breed:

Male or Female:

Spayed, Neutered, or Neither:

Color(s) of Animal:

Microchip Number:

Rabies Tag Number:

Vaccine Date:

Expiration Date:

Name of Veterinarian Office:

Animal Number 4 Name:

Animal Type-dog or cat:

Animal Breed:

Male or Female:

Spayed, Neutered, or Neither:

Color(s) of Animal:

Microchip Number:

Rabies Tag Number:

Vaccine Date:

Expiration Date:

Name of Veterinarian Office: