

**CITY OF LONGMONT 2020 PET LICENSING INFORMATION - PLEASE PRINT CLEARLY**

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Name of your Vet Clinic: \_\_\_\_\_

Did you purchase a Longmont City License last year?  Yes  No

Would you like to receive e-mails from Longmont Humane Society?  Yes  No  I already do!

Would you like to make a tax-deductible donation to help our shelter's homeless animals?  Yes  No

Can Longmont Humane society share your name and phone number with a "finder" in the event your pet is found running loose?  Yes  No

Name: \_\_\_\_\_ Species  Dog  Cat  Pot-Bellied Pig Age: \_\_\_\_\_

Breed(s): \_\_\_\_\_ Color(s): \_\_\_\_\_

Sex:  Male  Female Spayed/neutered:  Yes  No Size:  Small  Medium  Large

For completion by license vendor: Rabies:  Attached Fee:  License Number:

Name: \_\_\_\_\_ Species  Dog  Cat  Pot-Bellied Pig Age: \_\_\_\_\_

Breed(s): \_\_\_\_\_ Color(s): \_\_\_\_\_

Sex:  Male  Female Spayed/neutered:  Yes  No Size:  Small  Medium  Large

For completion by license vendor: Rabies:  Attached Fee:  License Number:

Payment Type:  Cash  Visa  M/C  Discover Staff Initials \_\_\_\_\_

**CITY OF LONGMONT 2020 PET LICENSING INFORMATION - PLEASE PRINT CLEARLY**

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Name of your Vet Clinic: \_\_\_\_\_

Did you purchase a Longmont City License last year?  Yes  No

Would you like to receive e-mails from Longmont Humane Society?  Yes  No  I already do!

Would you like to make a tax-deductible donation to help our shelter's homeless animals?  Yes  No

Can Longmont Humane society share your name and phone number with a "finder" in the event your pet is found running loose?  Yes  No

Name: \_\_\_\_\_ Species  Dog  Cat  Pot-Bellied Pig Age: \_\_\_\_\_

Breed(s): \_\_\_\_\_ Color(s): \_\_\_\_\_

Sex:  Male  Female Spayed/neutered:  Yes  No Size:  Small  Medium  Large

For completion by license vendor: Rabies:  Attached Fee:  License Number:

Name: \_\_\_\_\_ Species  Dog  Cat  Pot-Bellied Pig Age: \_\_\_\_\_

Breed(s): \_\_\_\_\_ Color(s): \_\_\_\_\_

Sex:  Male  Female Spayed/neutered:  Yes  No Size:  Small  Medium  Large

For completion by license vendor: Rabies:  Attached Fee:  License Number:

Payment Type:  Cash  Visa  M/C  Discover Staff Initials \_\_\_\_\_