<u>CITY OF LONGMONT 2023 PET LICENSING INFORMATION - PLEASE PRINT CLEARLY</u>

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 \square Cat \square Pot-Bellied Pig Age:
Breed(s):	Color(s):	
Sex: Male Female	Spayed/neutered: ☐ Yes ☐	
For completion by license vendor:	Rabies: Attached Fee:	License N
		Dog □ Cat □ Pot-Bellied Pig Age:
	_	
Sex: ☐ Male ☐ Female	Spayed/neutered: ☐ Yes ☐] No Size: □ Small □ Medium □ Large
For completion by license vendor:	Rabies: Attached Fee:	License N
	Payment Tyne: □ M/C □ VISA □ Oth	er - Cash - Chack Staff Initials
Payment Type: □ M/C □ VISA □ Other □ Cash □ Check Staff Initials		
CITY OF LONGMONT	2023 PET LICENSING INFOR	MATION - PLEASE PRINT CLEARLY
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Owner Name: Street Address Home Phone:	Cell Phone: Name o	Date: Zip Code: Work Phone:
Owner Name: Street Address Home Phone: E-mail address:	Cell Phone: Name of last year? Yes No	Date: Zip Code: Work Phone: of your Vet Clinic:
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