## **Pet Licence Form**

To obtain additional forms you can go online to **ajax.docupet.com/ajax/offline** or email us at **info@docupet.com**. This form can either be mailed to The Town of Ajax, or brought in by person to The Town of Ajax.



## Address & Contact Information

First Name*					Last Name*				
Email Address (required for online account)						DOB (MM/DD/YYYY)			
Street Number*	Street Name*								
Unit or Apartment	Postal Code∗	¢	Telephone*		Cellphone		Cellphone		
Pet Information									
Pet's Name*					Pet's Breed*		Pet's DOB (YYYY/MM/DD)		
Gender*		Spayed/Neutered*		Microchipped*	⊖ No	If yes, provide microchip number			
Colour*		Veterinary Clinic			Tag Type*	(22.5mm x 25mm) 🛛 Large (30mm x 33.2mm)			
Licence Type O Dog: Sterilized - 1 O Dog: Sterilized, Mi \$25.65 O Dog: Fertile - 1 Ye	crochipped	d - 1 Year 🛛 🔿 Cat	: Sterilize	ed - 1 Year \$3	d - 1 Year \$51.1 2.09 ped - 1 Year \$2!	Ċ	) Cat: Fertile - 1 Y ) Cat: Fertile, Micr	ear \$57.52 rochipped - 1 Year \$51.19	
Additional Pet									
Pet's Name*					Pet's Breed*		Pet's DOB (YYYY/MM/DD)		
Gender*	Spayed/Neutered* Microchipped*			If yes, provide microchip number					
$\bigcirc$ Male $\bigcirc$ Female		⊖Yes ⊖No		⊖ Yes	⊖ No				
Colour* Veterinary Clinic				T <sub>ag Type*</sub> ○ Small (22.5mm x 25mm) ○ Large (30mm x 33.2mm)					
Licence Type O Dog: Sterilized - 1 O Dog: Sterilized, Mi \$25.65 O Dog: Fertile - 1 Ye	crochipped	d - 1 Year 🛛 🔿 Cat	: Sterilize	ed - 1 Year \$3	d - 1 Year \$51.1 2.09 ped - 1 Year \$2!	Ċ	) Cat: Fertile - 1 Y ) Cat: Fertile, Micr	ear \$57.52 rochipped - 1 Year \$51.19	
Payment*									
Payment Type by Mail					Payment Type in Person				
$\bigcirc$ Cheque (all NSF cheques are subject to an administrative fee)					$\bigcirc$ Cash $\bigcirc$ Debit $\bigcirc$ Cheque $\bigcirc$ VISA $\bigcirc$ MasterCard				
					1	Sum \$	Received		
I acknowledge that the defined under the Mun that such information is be utilized by the Towr hereby authorize the To be contacted directly re fee this application bec Should you require furt 905-683-8275. Contac or by phone 1-855-249	icipal Free s required   n for admin own of Aja egarding th omes a lice her inform t DocuPet	dom of Information pursuant to the prov istration of this licer x to release my "per recovery of my pe ence. ation, please contact	and Prot visions of nce. In th sonal infe et. On ap	ection of Priva the Municipa e event my pe ormation" in o proval and pay wn of Ajax at	acy Act, and I Act and will et is lost, I rder that I may	Please Pet Owner S	Who d	Vhere do I mail this form? The Town of Ajax 65 Harwood Ave S Ajax ON L1S 2H9 o I make a cheque out to? payable to the Town of Ajax.	