# **Clark County Dog License Form**

To obtain additional forms you can go online to clarkcountyohio.docupet.com/offline or email us at info@docupet.com. Unless otherwise specified, this form must be completed in its entirety.



# **Contact Information**

First Name	Last Name
Email Address (Ontional: required for online account and electronic renewal reminder	c)

Email Address (Optional: required for online account and electronic renewal reminders)

Telephone	Phone Type	*DOB (MM/DD/YYYY)
	$\bigcirc$ Home $\bigcirc$ Mobile $\bigcirc$ Work	
		*Optional

## **Mailing Address**

Street	Street Name	Unit or	City	ZIP Code
Number		Apartment		

If your mailing address is not the physical address for your pet, you must complete the Physical Address section below.

## **Physical Address**

Street	Street Name	Unit or	City	ZIP Code
Number		Apartment		

### Dog Information

Dog's Name		Dog's Breed		Dog's DOB (MM/DD/YYYY)	
Sex	Spayed/Neutered	Microchi	pped If yes, provide microchip		p number
$\bigcirc$ Male $\bigcirc$ Female	$\bigcirc$ Yes $\bigcirc$ No	⊖ Yes	$\bigcirc$ No		
Color	Veterinary Clinic		Tag Size		
			$\bigcirc$ Small (0.86 inches) $\bigcirc$ Large (1.25 inches)		
License Type					
○ Dog License - 1 Year \$22.00		$\bigcirc$ Permanent Dog License \$220.00			
O Dog License - 3 Year \$66.00 O Puppy License - 1 Year \$11.00					
O Dog License - 1 Year \$22				•	

## **Payment & Donation**

Yes! I want to help more pets in my community find a safe and happy home. I want to make a	Sum Received
donation of	
○ \$12	\$
Payment Type	
⊖ Check	

#### Who do I make a check out to?

Please make checks payable to DocuPet

#### Where do I mail this form?

DocuPet 15 Technology Pl Suite 1 East Syracuse NY 13057