

PET LICENSE

I understand that data collected in this application may be classified as public under the MN Data Practices Act and will be released to the public upon request. I understand I am not required to provide this information but failure to do so may result in denial of my license application.

License Tag No. _____

Expires _____

Name _____

Date _____

Address _____

Amount Received \$ _____

Name of Animal _____

Markings _____

Male

Female

Unsexed

CANINE	
BOXER	
BULL	
CHIHUAHUA	
CHOW	
COLLIE	
DACHSHUND	
GREAT DANE	
HOUND	
MIXED BREED	
PEKINGESE	
POODLE	
SETTER	
SHEP.	
SPANIEL	
TERRIER	
FELINE	
(AGE)	
WHITE	
BLACK	
BROWN	
BRINDLE	
RED	
TAN	
SPOTTED	

I hereby acknowledge receipt of amount indicated above, being the amount due for pet license for one pet as described above. You are authorized to keep said pet without further payment until Pet Tax for next fiscal year becomes due.

By _____