



Salt Lake County Animal Services Pet License Application



Owner's name:

Phone #1: Phone #2:

Mailing address:

City: Zip:

Home address:

City: Zip:

E-mail address:

Date of Birth:

Description of Pet

Species: (check one): Dog Cat Ferret

Pet's name: Pet's age or Birth date:

Predominant breed:

Secondary breed:

Predominant Color:

Secondary Color:

Sex (check one): Male Neutered Female Spayed

I would like to make a voluntary donation in the amount of \$_____.____to save pet's lives.
I would like my donation to be used for:

- | | |
|--|---|
| <input type="checkbox"/> Special Needs Adoption Fund | <input type="checkbox"/> Shelter improvements |
| <input type="checkbox"/> Injured animal care | <input type="checkbox"/> Community education |

Please mail this form with appropriate vaccination, sterilization, and microchip certificates and fees to:

Salt Lake County Animal Services
ATTN: Licensing
511 West 3900 South
Salt Lake City, UT 84123

Make checks payable to: Salt Lake County Treasurer

****License before your pet reaches 5 months of age or within 30 days of moving into one of our areas to avoid a \$25.00 late fee.****