| PE | T LICENSE APPLICATION |
|--|--|
| License Per | iod July 1 st through June 30 th Each Year |
| For City (| of Pleasant Valley, Missouri use only |
| CITY TAG # | License Required: |
| | Dogs, Cats, Miniature Pigs |
| DATE ISSUED | License animals over 90 days old |
| | Dangerous dog, and "pit bull breeds", |
| FEE (IF APPLICABLE) \$ | per ordinance, require additional |
| | requirements and processing |
| RABIES CERTIFICATE MUST ACCOMPANY AP | PLICATION RABIES VACCINATION DATE WITHIN 365 DAYS |
| Annual pet tags are fro | ee; replacement for issued license tag will be \$.50 |
| | |
| MAIL TO: | FAX TO: E-MAIL |
| City of Pleasant Valley, Missouri | 816-781-6002 dcrossley@pleasantvalleymo.org |
| 6500 Royal Street | |
| Pleasant Valley, MO 64068 | |
| | |
| SUBMIT SEPA | RATE APPLICATION FOR EACH ANIMAL |
| Limit of 4 dogs, 4 cats or 4 miniature pig | gs or any combination of, but not more than a total of 4 animals |
| requiring tags. Please allow 3 | B business days for processing before picking up pet tag. |
| | |
| NAME OF OWNER(S): | PHONE # |
| ADDRESS: | PHONE# |
| PLEASANT VALLEY, MO 64068 | E-MAIL |
| | |
| DOG | CAT PIG |
| NAME OF PET: | DDEED. |
| NAIVIE OF PET. | BREED: |
| COLOR: | CHIPPED: |
| | |
| MALEFEMALE | SPAYED/NEUTERED: |

OWNER'S SIGNATURE:

PRINTED NAME: _____

DANGEROUS DOG/PIT BULL BREEDS

RABIES TAG: #______1 YEAR_____3 YEAR____ DATE VACCINATED: ______ DATE DUE: _____

PICK UP PET TAG AT: CITY HALL_____ (M-F 8AM-5PM) POLICE DEPARTMENT_____ (NOT M-F 8AM-5PM)

2 COLOR PHOTOGRAPHS_____

\$300,000.00 PER INCIDENT PUBLIC LIABILITY INSURANCE______ CONTINUOUS COVERAGE____

INSURANCE COMPANY____

A COPY OF THE POLICY MUST BE SUBMITTED WITH APPLICATION