Shelburne Dog Licence Form

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



st Name			Last Name					
r online account and electror	nic renewal remino	ders)						
Telephone Phone Type O Home O M						*DOB (YYYY/MM/DD)		
			<u> </u>					
					optional .			
Street Name			Unit or Apartmen	,			Postal Code	
al address for your pet, you	must complete t	he Physical A	ddress sectio	n belo	w.			
Street Name			Unit or City Apartment		City		Postal Code	
Dog's Name			Dog's Breed			Dog's DOB (YYYY/MM/DD)		
Spayed/Neutered	Microchi	Microchipped		If yes, provide microchi				
○ Yes ○ No	○ Yes	○ No						
		_						
.00		○ Inta	ct Dog \$3	5.00				
Payment Type						Sum Received		
	Phone Ho al address for your pet, you	Phone Type	Phone Type	Phone Type	Phone Type Home Mobile Work Unit or Apartment Apartment Unit or Apartment Unit or Apartment Dog's Breed Dog's Breed Figure No Yes No Yes Sono Yes Small (22.5mm x 2)	Phone Type	Phone Type	

Who do I make a cheque out to?

Please make cheques payable to DocuPet.

Where do I mail this form?

DocuPet 2 Gore St Kingston ON K7L 2L1