Minto Pet Licence Form

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



2 Gore St

Kingston ON K7L 2L1

Contact I	nformation									
First Name				Last N	Last Name					
Email Addre	ess (Optional: require	ed for online account and el	ectronic renewal remin	ders)						
Telephone			Phone Type			*DOB (YYYY/MM/DD)				
			○ Home ○ Mobile ○ Work							
				*Optional						
Mailing A	ddress									
Street Number	Street Name				Unit or Apartment	City		Postal Code		
If your mailing	address is not the ph	ysical address for your pet	, you must complete	the Physical A	Address section b	pelow.				
Physical A	Address									
Street Number	Street Name				Unit or Apartment	City			Postal Code	
Pet Inforn	nation									
Pet's Name				Pet's Bre		Pet's DOB (YYYY/MM/DD)				
Sex Spayed/Neut			Microchi	Microchipped		If yes, provide microchip number				
		○ Yes ○ No	○ Yes							
Colour Veter		Veterinary Clinic	erinary Clinic		Tag Size ○ Small (22.5mm x 25mm)			○ Large (30mm x 33.2mm)		
Licence Typ	е			'					·	
O Dog Lice	ense \$20.00									
Payment										
Payment Type Cheque							Sum Received \$			
	ake a cheque					Where DocuP		I mail this	form?	