## **Teller County Pet License Form**

To obtain additional forms you can go online to **tellercounty.docupet.com/offline** or email us at info@docupet.com. This form can either be mailed to Teller County or brought in by person to the participating locations..



Address & Contact Ir	nformation							
First Name				Last Name				
Email Address (required for online accord	unt)							
Street Number Street Name and City								
Unit or Apartment	ZIP Code			Telephone		Cell Phone		
Pet Information								
•							D-#- DOR (MM /DD 0000)	
Pet's Name		Pet's preed				Pet's DOB (MM/DD/YYYY)		
Sex	Spayed/Neutered		Microchipped		If yes, provide microchip number			
○ Male ○ Female	○ Yes ○ No		○ Yes ○ No					
Color	Veterinary Clinic				Tag Size			
					○ Small (0.86 inches) ○ Large (1.25 inches)			
Rabies Expiration Date (YYYY-MM-DD)								
		○ My pet's rabies vaccination is current						
License Type								
○ Spayed/Neutered Dog \$	10.00				eutered Cat Voluntary \$	10.00		
<ul><li>Intact Dog \$30.00</li><li>Spayed/Neutered Dog - 1</li></ul>		<ul><li>Intact Cat Voluntary \$30.00</li><li>Spayed/Neutered Cat Voluntary - Seniors Fee \$5.00</li></ul>						
*Pet owners must be 65 or older to				<u></u> Эраусалт	caterea out voiditary	<b>G</b> CIIIOI	στου φοίου	
Additional Det Inforn	nation							
Additional Pet Information			Datta Dava d			D. II. DOD (MANA/DD 0000)		
Pet's Name			Pet's Breed				Pet's DOB (MM/DD/YYYY)	
Sex	Spayed/Neutered		Microchipped		If yes, provide microchip number			
○ Male ○ Female				) No				
Color Veterinary Clinic			Tag Size					
					○ Small (0.86 inches) ○ Large (1.25 inches)			
Rabies Expiration Date (YYYY-MM-DI	)							
		O My pet's	s rabies vacc	ination is cu	rrent			
License Type								
					Spayed/Neutered Cat Voluntary \$10.00			
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*Pet owners must be 65 or older to				○ Spayed/14	ediered Cat Voluntary	Jernor	3 I ee \$5.00	
	. ,							
Payment								
Payment Type by mail				Payment Type in person				
○ Check					○ Debit ○ Check ○ VISA ○ MasterCard			
					Sum Received			
					\$			

## Where do I mail this form?

TCRAS P.O Box 904 Divide CO 80814 Who do I make a check out to? Please make checks payable to TCRAS.

Note that all pet's must have current rabies certification in order to complete the registration process. By completing and submitting the below form you are agreeing that all information provided is truthful and accurate, to the best of your knowledge.