

GSN PETAWAWA PET LICENSES: valid (unless revoked sooner) until 31<sup>st</sup> day of

December 20 16

OFFICE USE ONLY

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Alternative Phone #: \_\_\_\_\_

<b>Price per dog (spay/neutered)</b>	<b>Price per dog (intact)</b>	<b>Price per cat (spay/neutered)</b>	<b>Price per cat (intact)</b>	<b>After March 1</b> All licenses subject to additional administrative fees and/or administrative action.
\$20.00	\$25.00	\$20.00	\$25.00	

In consideration of the fee paid to the Ontario SPCA, as an agent for GSN Petawawa, this licensee is granted to own, possess or harbour an animal within the limits of the RHU. This license is issued under authority of Administrative Instructions 5.006. For information on Animal Control contact: Ontario SPCA Renfrew County Animal Centre, 387 Paquette Road, Petawawa, ON (613) 588-4508

**FIRST PET'S INFORMATION**

Animal's Name: \_\_\_\_\_ Microchip # \_\_\_\_\_ Company: \_\_\_\_\_ TAG #

CAT  DOG  MALE  FEMALE  FIXED  NOT FIXED

Age: \_\_\_\_\_ Primary Breed: \_\_\_\_\_ Colours and Markings: \_\_\_\_\_

**\*\*Please attach proof of rabies immunization\*\*** Veterinary Clinic \_\_\_\_\_

Total Tag Fee: \$ \_\_\_\_\_

**SECOND PET'S INFORMATION**

Animal's Name: \_\_\_\_\_ Microchip # \_\_\_\_\_ Company: \_\_\_\_\_ TAG #

CAT  DOG  MALE  FEMALE  FIXED  NOT FIXED

Age: \_\_\_\_\_ Primary Breed: \_\_\_\_\_ Colours and Markings: \_\_\_\_\_

**\*\*Please attach proof of rabies immunization\*\*** Veterinary Clinic \_\_\_\_\_

Total Tag Fee: \$ \_\_\_\_\_

**THIRD PET'S INFORMATION**

Animal's Name: \_\_\_\_\_ Microchip # \_\_\_\_\_ Company: \_\_\_\_\_ TAG #

CAT  DOG  MALE  FEMALE  FIXED  NOT FIXED

Age: \_\_\_\_\_ Primary Breed: \_\_\_\_\_ Colours and Markings: \_\_\_\_\_

**\*\*Please attach proof of rabies immunization\*\*** Veterinary Clinic \_\_\_\_\_

Total Tag Fee: \$ \_\_\_\_\_

All dog and cats (including indoor cats) kept in GSN Petawawa RHUs must be vaccinated against **RABIES** yearly or as recommended by your veterinarian. Proof of **RABIES** vaccination is due no later than **30 days** from license issuing date. Failure to provide proof of **RABIES** vaccination may result in administrative action.

The undersigned agrees to the above requirements and certifies that all information provide is true, correct and complete in listing all animal on the above property.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TOTAL AMOUNT PAYABLE:\$ \_\_\_\_\_

Mail to: Ontario SPCA Renfrew County Animal Centre  
Box 322, Petawawa, ON, K8H 3J1

CASH  CHEQUE  DEBIT  VISA  MASTERCARD

RECEIPT#

CREDIT CARD NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_