Toronto Pet Licence Form

To obtain additional forms you can go online to toronto.docupet.com/city-of-toronto/offline



Building B, 2nd Floor Toronto ON M4M 1B7

Unless otherwise specified, this form must be completed in its entirety.

| Contact Info | ormation | | | | | | | | | | | |
|--|--|---|---|--|---|--|---|---|----------------------------------|---|--|--|
| First Name | | | | | | Last Name | | | | | | |
| Email (Optional: re | quired for online account) | | | | | | | | | | | |
| Telephone Number | er | Phone Type O Home | ○ Work | | | I do hereby attest that I am 65 or older and quality for the senior citizen rate | | | | | | |
| Mailing Add | ress | | | | | | • | | | | | |
| Street Number | Street Name | treet Name | | | | Unit or Apartment City | | City | ity | | Postal Code | |
| If your mailing address is not the physical address for your pet, you must complete the Physical Address section below. Physical Address | | | | | | | | | | | | |
| Street Number | Street Name | | | | Unit or Apartment | | City | | | Postal Code | | |
| Pet Information | | | | | | | | | | | | |
| Pet's Name | | | | | | Pet's Breed | | | Pet's DOB (YYYY/MM/DD) | | | |
| Sex Spayed/Neutered | | | | Microchipped | _ | | If yes, provide | ovide microchip number | | | | |
| ○ Male ○ Female ○ Yes ○ No | | | No | ○ Yes | ○ No | | | | | | | |
| Colour | | Veterinary Clinic | Tag Size ○ Small (22.5mm x 25mm) ○ Large (30mm x 33.2mm) | | | | | | | | | |
| Licence Type Dog - Not Spayed/Neutered - 1 Year \$60.00 Dog - Spayed/Neutered - 1 Year \$25.00 Service Animal - 1 Year \$0.00 Senior Rate: Dog - Not Spayed/Neutered - 1 Year \$30.00 Senior Rate: Dog - Spayed/Neutered - 1 Year \$12.50 | | | | | | | ed - 1 Year \$! 1 Year \$15.00 ayed/Neutere | Year \$15.00 yed/Neutered - 1 Year \$25.00 | | | | |
| | st be 65 or older to qua | | | | | | | | | | | |
| Municipal Licer Item 2018.LS2 of Toronto Mu this form will b | nsing and Standards v 7.3, as confirmed by t nicipal Code, Chapter e shared with DocuP terships and Animal S | vith the assistance the City of Toronto 349, Animals, Art et Inc who may als | of DocuPet By-law 105 icle V, Cats. To o use your po | 8-2018; the Ci The information ersonal informa | ity of Toro n will be us ation for co | nto Mu sed to a ommer | ınicipal Code administer de cial purpose | e, Chapter 34 og and cat lic s. Questions | 9, Anima ences. P about th | als, Article IV, ersonal inform is collection o | Dogs; and, the City mation collected on can be directed to | |
| Payment & I | Donation | | | | | | | | | | | |
| Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation to Toronto Animal Services in the amount of | | | | | | | | | Sum Received | | | |
| ○ \$10 ○ \$20 ○ \$50 ○ \$100 ○ \$200 ○ \$500 | | | | | | | | | \$ | | | |
| Payment Type | | | | | | | | | Ψ | | | |
| ○ Cheque | 9 | | | | | _ | | | | | | |
| Please make cheques payable to Toronto Animal Services. Toron | | | | | | | | Toront | | mail this fo al Services ve | orm? | |

Strategic Partnerships collects personal information on this form under the legal authority of Toronto City Council Item 2012.EX23.17, as confirmed by the City of Toronto By-law 1394-2012. The information is used to process your donation, including issuing a tax receipt, and for other administrative purposes. It is also used to deliver information about opportunities to help, updates on the progress we're making together and to ask you for feedback related to your donation. Questions about this collection can be directed to the Director, Strategic Partnerships, City Hall, 100 Queen Street West, 10th Floor, East Tower, Toronto, Ontario, M5H 2N2 or by telephone at 416-392-1144.

Required Documentation

If registering a service animal, pet owners must provide copy of certificate from the Hearing Ear Dogs of Canada, the Lions Foundation for Personal Assistance Dogs, or a satisfactory equivalent. Note that documents submitted will not be mailed back to you.