

Owner

169 Front Street Belleville ON K8N 2Y8 Phone: 613-968-6481 Fax: 613-967-3206

www.belleville.ca

For Office Use Only
Issued By:
Date Issued:

DOG TAGS EXPIRE DECEMBER 31

DOG TAG APPLICATION FORM

Name:		Phone: H	Phone: Home:					
		Alte	rnate:					
Address:	/ time:	time:						
		Email:						
Dog Name(s)	Tag # Office use	Breed / Colour / Chip #	М	F	Spayed	Neutered	Fee Office use	
						\$		
verify the informa	ation contain	ned within this form is corre	ct and	my	pet's vacci	nes are up to	o date.	
Dog Owner's Signature				Date				

Please notify the Corporate Services Department of any change to your pet's status.

Veterinarian's Certificate is required to certify that dogs have been spayed or neutered. Certified Service dogs are not required to obtain a tag but tags are available at no cost to the owner should they request a tag.

The tag fee for dogs registered after September 30th shall be 50% of the regular fee.

Personal information on this form is collected under the authority of the Municipal Act and is used to process Dog Tag application information and to help manage Animal Control procedures administered by the City of Belleville. For further information, please contact the Corporate Services Department, City of Belleville ON K8N 2Y8 613-968-6481