

# Deschutes County Dog License Form

To obtain additional forms you can go online to [deschutescounty.demo-us.docupet.com/offline](http://deschutescounty.demo-us.docupet.com/offline) or email us at [info@docupet.com](mailto:info@docupet.com). Unless otherwise specified, this form must be completed in its entirety.



## Contact Information

|                                                                                                        |                                                                                                  |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| First Name                                                                                             | Last Name                                                                                        |
| Email Address                                                                                          |                                                                                                  |
| Telephone                                                                                              | Phone Type<br><input type="radio"/> Home <input type="radio"/> Mobile <input type="radio"/> Work |
| <input type="radio"/> I do hereby attest that I am 62 or older and qualify for the senior citizen rate |                                                                                                  |

## Mailing Address

|               |             |                   |      |          |
|---------------|-------------|-------------------|------|----------|
| Street Number | Street Name | Unit or Apartment | City | ZIP 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 | ZIP Code |
|---------------|-------------|-------------------|------|----------|

## Dog Information

|                                                                |                                                                       |                                                                                                 |                                  |                                      |
|----------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|----------------------------------|--------------------------------------|
| Dog's Name                                                     |                                                                       | Dog's Breed                                                                                     |                                  | Dog's DOB (if known)<br>(MM/DD/YYYY) |
| Sex<br><input type="radio"/> Male <input type="radio"/> Female | Spayed/Neutered<br><input type="radio"/> Yes <input type="radio"/> No | Microchipped<br><input type="radio"/> Yes <input type="radio"/> No                              | If yes, provide microchip number |                                      |
| Color                                                          | Current Veterinary Clinic                                             | Tag Size<br><input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches) |                                  |                                      |

### License Type

- |                                                             |                                                                                  |
|-------------------------------------------------------------|----------------------------------------------------------------------------------|
| <input type="radio"/> Unaltered Dog (1 Year) \$36.00        | <input type="radio"/> Spayed/Neutered Dog (3 Years) \$58.00                      |
| <input type="radio"/> Spayed/Neutered Dog (1 Year) \$22.00  | <input type="radio"/> Senior Owner (62+) - Spayed/Neutered Dog (1 Year) \$16.00  |
| <input type="radio"/> Unaltered Dog (2 Years) \$67.00       | <input type="radio"/> Senior Owner (62+) - Spayed/Neutered Dog (2 Years) \$32.00 |
| <input type="radio"/> Spayed/Neutered Dog (2 Years) \$39.00 | <input type="radio"/> Senior Owner (62+) - Spayed/Neutered Dog (3 Years) \$48.00 |
| <input type="radio"/> Unaltered Dog (3 Years) \$98.00       |                                                                                  |

\* Pet owners must be 62 or older to qualify for senior citizen rates.

## Payment

|                                             |                    |
|---------------------------------------------|--------------------|
| Payment Type<br><input type="radio"/> Check | Sum Received<br>\$ |
|---------------------------------------------|--------------------|

### Who do I make a check out to?

Please make checks payable to DocuPet

### Where do I mail this form?

DocuPet  
15 Technology Pl  
Suite 1  
East Syracuse NY 13057

## Required Documentation

You are required to provide a copy of your dog's rabies certificate. Note that document submissions will not be mailed back to you.