Carlsbad Dog License Form

To obtain additional forms you can go online to sandiego.docupet.com/carlsbad/offline or email us at info@docupet.com. Unless otherwise specified, this form must be completed in its entirety.



15 Technology Place, Suite 1 East Syracuse NY 13057

Contact I	nformation											
First Name					Last Na	Last Name						
Email Addr	ess (Optional: required	for online account an	nd electronic r	enewal remino	ders)							
Telephone			Phone Type			*DOB (MM,			/DD/YYYY)			
			○ Home ○ Mobile ○ Wo									
								*Optional	ı			
Mailing A	ddress											
Street Number	Street Name	Street Name					Unit or Apartment				ZIP Code	
	address is not the phys	sical address for you	r pet, you mu	st complete t	he Physical <i>I</i>	Address	section be	low.				
Physical Address Street Name						11 '1 6'1					7ID Code	
Street Number	Street Name					Unit or C Apartment		City	City		ZIP Code	
Dog Infor	mation											
Dog's Name					Dog's Bre	Dog's Breed				Dog's DOB (MM/DD/YYYY)		
Sex	Spayed/Neutered			Microchipped			If yes, provide microchip number					
○ Male	Male Female Yes		No	○ Yes								
Color Veterinary Clinic				Tag Size			II (0.86 inches) ○ Large (1.25 inches)					
License Typ	pe	I			0 1			,	0 - V	,,		
 ○ Altered Dog - 1 Year \$20.00 ○ Altered Dog - 2 Year \$35.00 ○ Altered Dog - 3 Year \$50.00 ○ Unaltered Dog - 2 Year \$90 ○ Unaltered Dog - 3 Year \$14 								Year \$90.0	00			
Payment	& Donation											
Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of									Sum Received			
									\$			
Payment Type												
O Check												
								Wher Docul		o I mail this	form?	

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.