



TOWN OF THOMSON
 25 East Harney Road, P.O. Box 92
 Esko, Minnesota 55733
 (218) 879-9719

For Office Use Only:	
_____	Tag Number
_____	Date Received
\$ _____	Amount

Pet License Application Form

Fill out one form for each pet and return to:

Name of Owner:	Name of Pet:	
Address:	Breed:	
	Color:	
Thomson Township	Age:	Weight:
Home Phone:	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Cell Phone:	Spayed/Neutered:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rabies Vaccination Information (Provide copy of Certificate of Vaccination)		
Vaccination Date:	Expiration Date:	
Veterinarian Name:	Veterinarian Address:	

Licenses are valid for 2 years from the date of issue.

Fees: Spay or Neuter Pet \$ 5.50 / 2 Year License
 Intact Pet \$10.50 / 2 Year License

If tag is still in good condition, you may keep the existing tag and either mail in or drop off completed form with fee.

Please Indicate if a new tag is needed: Yes No