



**DESERT HOT SPRINGS**

*Where life flows.*

## City of Desert Hot Springs Animal Care and Control Center

65810 Hacienda Ave. • Desert Hot Springs, CA 92240 • Telephone (760) 329-6411 ext. 450 • [www.cityofdhs.org](http://www.cityofdhs.org)

### **Pet License Application**

*In addition to the Pet License Application, you will need to provide the following items:*

- Copy of Current Rabies Certificate
- Proof of Microchip, unless previously verified
- If applying for an Altered Pet License - Proof of Surgery Certificate, unless previously verified
- If applying for a Senior Citizens License - Valid ID to verify eligibility
- Payment of Total License Fees - Payable via check, Money Order, Cash or Credit Card

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#### **PET OWNER INFORMATION**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ SENIOR CITIZEN (60+) ☐

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ALTERNATE CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

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#### **PET INFORMATION**

PET NAME: \_\_\_\_\_ SEX: ☐ MALE ☐ FEMALE PET'S DOB: \_\_\_\_\_ PET'S AGE: \_\_\_\_\_

PRIMARY COLOR: \_\_\_\_\_ SECONDARY COLOR: \_\_\_\_\_ BREED: \_\_\_\_\_

IS YOUR PET SPAYED/NEUTERED? ☐ YES ☐ NO RABIES EXPIRATION DATE: \_\_\_\_\_

MICROCHIP NUMBER: \_\_\_\_\_ MANUFACTURER: \_\_\_\_\_

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#### **PAYMENT INFORMATION**

SELECT LICENSE TERM: ☐ 1 YEAR ☐ 2 YEAR ☐ 3 YEAR  
(The expiration date or license term cannot exceed the expiration date of the Rabie Vaccination)

SELECT LICENSE TYPE(S): ☐ ALTERED ☐ UNALTERED ☐ SENIOR CITIZEN