



PET LICENSE APPLICATION

Chariton Police Department
48559 Hy-Vee Rd

PLEASE FILL OUT ONE FORM FOR EACH PET
LICENSES EXPIRE JUNE 30TH YEARLY

New

Renewal

OWNER -

Name _____

Address _____

Chariton, IA 50049

Phone# _____ Phone 2 _____

PET -

Name _____

Dog

Cat

Male

Female

Breed _____

Spayed/Neutered Yes No

Description _____

RABIES TAG

(Copy of Certificate must be provided)

VACCINATION DATE

EXP. DATE

VETERINARIAN

Applicant Signature _____

If your pet has been microchipped, please provide a copy of the paperwork containing the number

Completed applications may be brought to the Lucas County Law Center. If mailing, be sure to include a check made payable to City of Chariton and a self-addressed, stamped envelope to P.O. Box 845 Chariton, Iowa 50049.

License for each pet is \$5 annually.

***** For City Use Only *****

Date Paid _____

Verified rabies expiration (initial) _____

License # Issued _____

Date tag mailed (if applicable) _____

Microchip # _____