

Inyo County Dog License Form

To obtain additional forms you can go online to inyocounty.docupet.com/offline or email us at info@docupet.com



Contact Information

First Name*	Last Name*	
Email Address (required for online account)		
DOB (MM/DD/YYYY)	Telephone*	Cellphone

Secondary Contact Information

First Name*	Last Name*
Email Address	
Telephone*	Cellphone

Mailing Address[†]

Street Number*	Street Name*	Unit or Apartment	Zip Code*
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[†]Note that if your mailing address is not the the physical address for your pet, you must complete the Physical Address section below.

Physical Address

Street Number*	Street Name*	Unit or Apartment	Zip Code*
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Dog Information

Dog's Name*	Dog's Breed*	Dog's DOB (MM/DD/YYYY)	
Gender* <input type="radio"/> Male <input type="radio"/> Female	Spayed/Neutered* <input type="radio"/> Yes <input type="radio"/> No	Microchipped* <input type="radio"/> Yes <input type="radio"/> No	If yes, provide microchip number
Color*	Veterinary Clinic	Tag Type* <input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches)	
License Type <input type="radio"/> Spayed/Neutered \$22.00 <input type="radio"/> Spayed/Neutered- Late \$30.00 <input type="radio"/> Intact \$45.00 <input type="radio"/> Intact- Late \$60.00			

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 <input type="radio"/> \$5 <input type="radio"/> \$10 <input type="radio"/> \$25 <input type="radio"/> \$100	Sum Received \$
Payment Type <input type="radio"/> Check	

Who do I make a check out to?

Please make checks payable to DocuPet. Note that your check must clear prior to your membership package being mailed.

Proof of rabies vaccination

Please include the required copy of your pet's rabies certificate. Note that it will not be mailed back to you.

If your pet is newly spayed/neutered, please include proof.

Where do I mail this form?

DocuPet
15 Technology Pl
Suite 1
East Syracuse NY 13057