City of Wapato
205 East Third Street
Wapato WA 98951-1326

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Phone: 509.877.2334
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ANIMAL LICENSE FORM

Owner Information

Owner Name: _____

Owner Address: _____

Owner Phone Number: _____ Date: _____

Animal Information

Animal Name: _____

Breed: _____

Color: _____

Age: _____ Sex: _____ Spade/Neutered: _____

Veterinarian/Clinic: _____

List of What to Bring

_____ Certification from Veterinarian that your animal has been fixed.

_____ Certification from Veterinarian that your animal is current and up-to-date with their shots-especially rabies.

_____ Picture, only if you have one.

For Official Use Only

Date: _____ Staff: _____

License Number: _____ Receipt # _____