Rosemead Pet License Form

To obtain additional forms you can go online to rosemead.docupet.com/offline or email us at info@docupet.com. Unless otherwise specified, this form must be completed in its entirety.



East Syracuse NY 13057

Contact In	nformation										
First Name				Last N	Last Name						
Email Addre	ess (Optional: required	for online account and	d electronic renewal remin	iders)							
Telephone			Phone Type			*[ООВ (мм/	DD/\	YYYY)		
			○ Home ○ Mobile ○ Work								
							OB is require nior citizen di	ired to determine eligibility to receive discounts.			
Mailing A	ddress										
Street Number	Street Name				Unit or Ci Apartment		City		ZIP Code		
If your mailing a	address is not the phys	sical address for your	pet, you must complete	the Physical <i>i</i>	Address sectio	n below	<i>1</i> .				
Physical A	Address										
Street Number	Street Name				Unit or Apartmen	it	City			ZIP Code	
Pet Inforn	nation										
Pet's Name			Pet's Breed				Pet's DOB (MM/DD/YYYY)				
Sex Spayed/Ne		Spayed/Neuter	ed Microchi	Microchipped If yes,			vide micro	ochi	p number		
○ Male ○ Female ○ Yes		○ Yes ○ N	lo ⊖ Yes	○ Yes ○ No							
Color Veterina		Veterinary Clin	ic	Tag Siz	ze mall (0.86 inches)						
License Typ	e Dog - 1 Year \$34.0	00	○ Spayed/Neutered							og - 1 Year \$8.00	
* Pet owners mu	ıst be 60 or older to q	ualify for senior citize	n rates.								
Payment of	& Donation										
Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of \$5 \cap \$10 \cap \$15 \cap \$100							а	Sum Received			
Payment Type								Ĺ			
O Check											
Who do I make a check out to? Please make checks payable to DocuPet						Where do I mail this form? DocuPet 15 Technology Pl Suite 1					

Required Documentation

You are required to provide a copy of your pet's rabies certificate. If you are licensing a new or recently spayed or neutered pet, you must also provide a spay/neuter certificate. Note that document submissions will not be mailed back to you.