

# Dog Licence Application



To obtain additional forms you can go online to [newtecumseth.docupet.com/offline](http://newtecumseth.docupet.com/offline) or email us at [info@newtecumseth.docupet.com](mailto:info@newtecumseth.docupet.com). This form can either be mailed to the Town of New Tecumseth or brought in by person to the participating locations.

## Address & Contact Information

First Name		Last Name	
Email Address (required for online account)			
Street Number	Street Name and City		
Unit or Apartment	Postal Code	Telephone	Cellphone

## Pet Information

Dog's Name		Dog's Breed		Dog's DOB (YYYY/MM/DD)	
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		
Colour	Veterinary Clinic	Tag Type <input type="radio"/> Small (22.5mm x 25mm) <input type="radio"/> Large (30mm x 33.2mm)			
Licence Cost					

**Is your dog microchipped? Bonus! Receive a \$5.00 discount on your licence fee!**

**Is your dog Canine Good Neighbour Certified? Bonus! Receive a 50% discount on your licence fee!**

**Renewing your licence late? You may be subject to late fees. Call DocuPet to confirm what you owe. 1-855-249-1370**

## Additional Pet

Dog's Name		Dog's Breed		Dog's DOB (YYYY/MM/DD)	
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		
Colour	Veterinary Clinic	Tag Type <input type="radio"/> Small (22.5mm x 25mm) <input type="radio"/> Large (30mm x 33.2mm)			
Licence Cost					

## Payment

Payment Type by Mail <input type="radio"/> Cheque <input type="radio"/> Visa <input type="radio"/> MasterCard		Payment Type in Person <input type="radio"/> Cash <input type="radio"/> Debit <input type="radio"/> Cheque <input type="radio"/> VISA <input type="radio"/> MasterCard			
Credit Card Holder Name	Credit Card Number	Expiry Date	CVV/CSC/CW2		
Sum Received \$					

### Who do I make a cheque out to?

Please make cheques payable to the Town of New Tecumseth

### Where do I mail this form?

The Town of New Tecumseth  
10 Wellington St E  
Alliston ON L9R 1A1

Store Name: \_\_\_\_\_

Seller: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

All NSF cheques are subject to an administrative fee.