



# HILSHIRE VILLAGE ANIMAL LICENSE APPLICATION

This application shall be submitted with proof of current vaccination records for the animal(s) listed below.

### OWNER INFORMATION

Owner's Name: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### PET INFORMATION

Name: \_\_\_\_\_ Color: \_\_\_\_\_

Neutered  
 Spayed

Unaltered Male  
 Unaltered Female

Breed: \_\_\_\_\_

Rabies Vaccination Date: \_\_\_\_\_ Expires: \_\_\_\_\_

HV License # \_\_\_\_\_

Name: \_\_\_\_\_ Color: \_\_\_\_\_

Neutered  
 Spayed

Unaltered Male  
 Unaltered Female

Breed: \_\_\_\_\_

Rabies Vaccination Date: \_\_\_\_\_ Expires: \_\_\_\_\_

HV License # \_\_\_\_\_

Name: \_\_\_\_\_ Color: \_\_\_\_\_

Neutered  
 Spayed

Unaltered Male  
 Unaltered Female

Breed: \_\_\_\_\_

Rabies Vaccination Date: \_\_\_\_\_ Expires: \_\_\_\_\_

HV License # \_\_\_\_\_

Name: \_\_\_\_\_ Color: \_\_\_\_\_

Neutered  
 Spayed

Unaltered Male  
 Unaltered Female

Breed: \_\_\_\_\_

Rabies Vaccination Date: \_\_\_\_\_ Expires: \_\_\_\_\_

HV License # \_\_\_\_\_

### VETERINARIAN INFORMATION

Veterinarian: \_\_\_\_\_

Phone: \_\_\_\_\_

**NEW REGISTRATION \$8.00 PER PET**

**RENEWAL \$1.00 PER PET**

#### OFFICIAL USE ONLY

Fee Received Date: \_\_\_\_\_

Cash  
 Check # or Online Auth. Code: \_\_\_\_\_

Received By: \_\_\_\_\_