

Lincoln County Animal Shelter Pet License Form

To obtain additional forms you can go online to lincolncountyor.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 | |

Mailing Address[‡]

| | | | |
|----------------|--------------|-------------------|-----------|
| Street Number* | Street Name* | Unit or Apartment | Zip Code* |
|----------------|--------------|-------------------|-----------|

[‡]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* |
|----------------|--------------|-------------------|-----------|

Pet Information

| | | | | | |
|---------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------|------------------------|--|
| Pet's Name* | | Pet's Breed* | | Pet's DOB (MM/DD/YYYY) | |
| Gender* | Spayed/Neutered* | Microchipped* | If yes, provide microchip number | | |
| <input type="radio"/> Male <input type="radio"/> Female | <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No | | | |
| Color* | Veterinary Clinic | Tag Type* | | | |
| | | <input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches) | | | |
| License Type | | | | | |
| <input type="radio"/> Altered- 1 Year \$5.00 | | <input type="radio"/> Unaltered- 2 Year \$65.00 | | | |
| <input type="radio"/> Altered- 2 Year \$10.00 | | <input type="radio"/> Voluntary Cat- 1 Year \$5.00 | | | |
| <input type="radio"/> Unaltered- 1 Year \$35.00 | | <input type="radio"/> Voluntary Cat- 2 Year \$10.00 | | | |

Additional Pet

| | | | | | |
|---------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------|------------------------|--|
| Pet's Name* | | Pet's Breed* | | Pet's DOB (MM/DD/YYYY) | |
| Gender* | Spayed/Neutered* | Microchipped* | If yes, provide microchip number | | |
| <input type="radio"/> Male <input type="radio"/> Female | <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No | | | |
| Color* | Veterinary Clinic | Tag Type* | | | |
| | | <input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches) | | | |
| License Type | | | | | |
| <input type="radio"/> Altered- 1 Year \$5.00 | | <input type="radio"/> Unaltered- 2 Year \$65.00 | | | |
| <input type="radio"/> Altered- 2 Year \$10.00 | | <input type="radio"/> Voluntary Cat- 1 Year \$5.00 | | | |
| <input type="radio"/> Unaltered- 1 Year \$35.00 | | <input type="radio"/> Voluntary Cat- 2 Year \$10.00 | | | |

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"/> \$20 <input type="radio"/> \$50 <input type="radio"/> \$100 | Sum Received |
| Payment Type <input type="radio"/> Check | \$ |

If paying by check, please make check payable to DocuPet

Where do I mail this form?

DocuPet
15 Technology Place, Suite 1
East Syracuse NY 13057

Required Documentation

You are required to provide a copy of your Pet's rabies certificate. Note that document submissions will not be mailed back to you.