

City of Avoca – Dog/Cat Tag Application

Owner Information (Please Print & Fill out completely)	Veterinarian Information
Full Name	Clinic name and address:
Address Apt #	
City State ZIP	
IMPORTANT: The following will be used to contact you if your pet is found.	
Home Phone Cell Phone	Verification of Spayed/Neutered Pet (For New Applicants Only) I, _____, (print veterinarian's name) verify that the pets listed below as sterilized are, in fact, spayed or neutered.
Email Address	Vet or City Employee may verify (please refer to Vaccination Sheet from Veterinarian's Office).
Affirmation of Owner: Each pet listed below has a current rabies inoculation according to state law. Please enter the rabies tag number in the appropriate box below.	
Signature of Owner Date	
City Employee Date	

Pet Information

Pet Name	Breed	Color(s)	Species	Gender	Sterile Fertile		Rabies	Vacc.	City Tag #
			(Circle One)	(Circle One)			Tag #	Expires	
			Dog / Cat	M / F	\$12.00	\$18.00			
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Please make check payable to: "City of Avoca" \$_____ + \$_____ = **Total Paid: \$_____**
Sterile + Fertile

Questions: Please call 1-712-343-2424 or visit our website at www.cityofavoca.com

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