

Maricopa County **Animal Care & Control**

Licensing Division P.O. Box 2959 Phoenix, AZ 85062 (602) 506-7387 pets.maricopa.gov

DOG LICENSE APPLICATION

In Maricopa County all dogs over the age of three months are required by law to be licensed and vaccinated against rabies. Application for license must be made within 15 days of vaccination. Residents new to Maricopa County and new dog owners must purchase a dog license within 30 days. The term of the license is based on the month and day of the most current rabies vaccination on record and is valid for no more than one calendar year.

LICENSE FEES	
Altered Dog (Spayed/Neutered)	\$17.00
Unaltered Dog	\$42.00
Senior Citizen age 65 or older; for Altered Dog(s) with a lim	it of two (2) dogs per
household (see bottom of application)*	\$6.00
Late applications will be assessed monthly pena	
Altered Dog (Spayed/Neutered) at \$2.00 p	
Unaltered Dog at \$4.00 per mont	

To obtain your license online (Visa, MasterCard or American Express) please make sure that you have your dog's current rabies vaccination certificate and credit card in front of you and go to http://www.maricopa.gov/Pets/License/Online.aspx

To obtain your license by mail remit this completed application, a copy of the rabies vaccination certificate (Note: receipts for vaccination are not acceptable for proof of vaccination and will delay the license application process), and your check made payable to Animal Care & Control to: Animal Care & Control, P.O. Box 2959, Phoenix, AZ 85062-2959

Last Name:		First Name:	
Street Address:		<u>-</u>	· · · · · · · · · · · · · · · · · · ·
City:	State:	Zip:	Email:
Home Phone #: ()		Message Phone #	: ()
If New Resident of Maricopa County	, Date of Residence:/_	_/ Date of Owne	rship of dog listed below://
	DOG INFO	RMATION	
Dog Name:			License Fee:\$
Breed:		·	Penalty Fee
	Spayed* □ Unaltered Male		(If applicable):\$
Sex (Check One): ☐ Neutered* ☐ \$	Spayed* □ Unaltered Male plication	□ Unaltered Female	Penalty Fee (If applicable):\$ I would like to give a voluntary donation of\$ to save more pets lives

Check box that applies and sign:

For Senior Tag: I swear or affirm that 🗆 I am 65 years of age or older and that the dog referenced in this document is sterilized and that I am the owner of the dog referenced in this document.

For Spay or Neuter: I swear or affirm that \square the dog referenced in this document is sterilized and that I am the owner of the dog Signature:

referenced in this document.