Gilpin County Sheriff's Office Dog License Registration Form

Owners Information:

Primary Owner's Name:			Secondary Owners Name:		
		4.00			
Physical Address:			City, State, Zip:		
Mailing Address:			City, State, Zip:		
Phone Number:			Alternate Phone Number:		
Dog(s) Information:					
Dog's Name	Breed		Sex		Color
Rabies Tag #		Vaccination Dat	e Vaccina		 ation Expiration
Dog's Name	Breed		Sex		Color
Rabies Tag #		Vaccination Date		Vaccination Expiration	
Dog's Name	Breed		Sex		Color
Rabies Tag #	Vaccination Date		e Vaccina		ation Expiration
U					
Dog's Name	Breed		Sex		Color
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Rabies Tag #		Vaccination Date		Vaccination Expiration	

- Per Resolution 99-13, each application for a County dog license tag, renewal or replacement shall be accompanied by a current certificate.
- The tag expiration is the same as the expiration of the rabies inoculation.
- Tags should be renewed in the event of residence change, ownership change, tag loss, or loss of legibility due to
- Keep all contact information and dog information updated.

C'	Data
Signature:	Date: