

# SPOKANIMAL

Companion Animal Relationship Enrichment

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**YOUR INLAND NORTHWEST HUMANE SOCIETY**

## PET LICENSE APPLICATION - City of Spokane



*Remember your pet's license is a ticket home if he or she becomes lost!*

(print/copy separate forms for each additional animal)

Mail to: SpokAnimal C.A.R.E.  
P.O. Box 3151  
Spokane, Washington 99220

**DOG** ..... Neutered/Spayed \$45.00  
..... UN-neutered/UN-spayed \$70.00 e

**CAT** ..... Neutered/Spayed \$35.00  
..... UN-neutered/UN-spayed \$45.00

**DISCOUNT:** Check which applies and subtract \$20 from the above fees IF:  
 The pet is under 6 months of age,  
 you've lived in Spokane for 30 days or less,  
 or this is a new pet acquired within the last 30 days

**LICENSE RENEWAL:**  
 Subtract \$20 from the above fees **IF** your current City of Spokane pet license has **NOT** expired.  
 Provide:  
 Current license number \_\_\_\_\_ expiration date \_\_\_\_/\_\_\_\_/\_\_\_\_\_.  
 If you have received a Courtesy Renewal Reminder in the mail, simply return card with payment.

*NOTE: only one discount can be applied per license*  
*All information with a star ( \* ) is required by the City of Spokane to license your pet.*

\* Last Name: \_\_\_\_\_ \* First Name(s): \_\_\_\_\_  
 (only one can be used per address)

\* Street \_\_\_\_\_ City of \_\_\_\_\_  
 Address: \_\_\_\_\_ \*Apt #: \_\_\_\_\_ Spokane, WA \*Zip: \_\_\_\_\_

Mailing Address:  
 (if different) \_\_\_\_\_ Zip: \_\_\_\_\_

\* Local Phone: (509) \_\_\_\_\_ - \_\_\_\_\_ Alternate Phone: (509) \_\_\_\_\_ - \_\_\_\_\_

Dog/Cat  
 \* Primary Breed: \_\_\_\_\_ Mixed?: \_\_\_\_\_ \* Sex \_\_\_\_\_ \* Neutered \_\_\_\_\_ \* Spayed \_\_\_\_\_

\* Color(s): \_\_\_\_\_ Pet's name: \_\_\_\_\_

\* Rabies Expiration date \_\_\_\_/\_\_\_\_/20\_\_\_\_

**TOTAL PAID for LICENSE: \$** \_\_\_\_\_

You may also contact me via my email address: \_\_\_\_\_.

*Please use my additional donation in the amount of \$\_\_\_\_\_ to help the animals.*