

# Pet License Application

To obtain additional forms you can go online to [tellercounty.docupet.com/offline](http://tellercounty.docupet.com/offline) or email us at [info@docupet.com](mailto:info@docupet.com). This form can either be mailed to Teller County or brought in by person to the participating locations.



## Address & Contact Information

First Name		Last Name	
Email Address (required for online account)			
Street Number	Street Name and City		
Unit or Apartment	Postal Code	Telephone	Cellphone

## Pet Information

Pet's Name		Pet Breed and Type		Pet DOB (YYYY/MM/DD)
Gender <input type="radio"/> Male <input type="radio"/> Female	Spayed/Neutered <input type="radio"/> Yes <input type="radio"/> No	Microchipped <input type="radio"/> Yes <input type="radio"/> No	If yes, provide microchip number	
Colour	Veterinary Clinic	Tag Type <input type="radio"/> Small (0.88 inches) <input type="radio"/> Large (1.18 inches)		
License Type <input type="radio"/> Spayed/Neutered Dog \$10.00 <input type="radio"/> Spayed/Neutered Cat Voluntary \$10.00 <input type="radio"/> Intact Dog \$30.00 <input type="radio"/> Intact Cat Voluntary \$30.00 <input type="radio"/> Spayed/Neutered Dog - Seniors Fee \$5.00 <input type="radio"/> Spayed/Neutered Cat Voluntary - Seniors Fee \$5.00				
Rabies Expiration Date (YYYY-MM-DD)		<input type="radio"/> My pet's rabies vaccination is current		

## Additional Pet

Pet's Name		Pet Breed and Type		Pet DOB (YYYY/MM/DD)
Gender <input type="radio"/> Male <input type="radio"/> Female	Spayed/Neutered <input type="radio"/> Yes <input type="radio"/> No	Microchipped <input type="radio"/> Yes <input type="radio"/> No	If yes, provide microchip number	
Colour	Veterinary Clinic	Tag Type <input type="radio"/> Small (0.88 inches) <input type="radio"/> Large (1.18 inches)		
License Type <input type="radio"/> Spayed/Neutered Dog \$10.00 <input type="radio"/> Spayed/Neutered Cat Voluntary \$10.00 <input type="radio"/> Intact Dog \$30.00 <input type="radio"/> Intact Cat Voluntary \$30.00 <input type="radio"/> Spayed/Neutered Dog - Seniors Fee \$5.00 <input type="radio"/> Spayed/Neutered Cat Voluntary - Seniors Fee \$5.00				
Rabies Expiration Date (YYYY-MM-DD)		<input type="radio"/> My pet's rabies vaccination is current		

## Payment

Payment Type by Mail <input type="radio"/> Check	Payment Type in Person <input type="radio"/> Cash <input type="radio"/> Debit <input type="radio"/> Check <input type="radio"/> VISA <input type="radio"/> MasterCard
Sum Received \$	

### Where do I mail this form?

TCRAS  
P.O Box 904  
Divide CO 80814

### Who do I make a check out to?

Please make checks payable to TCRAS.

Note that all pet's must have current rabies certification in order to complete the registration process. By completing and submitting the below form you are agreeing that all information provided is truthful and accurate, to the best of your knowledge.