



**APPLICATION FOR ANIMAL LICENSE**

Date: \_\_\_\_\_

Owner or Keeper's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Oak Ridge North, TX 7738  
(Address) (City) (State) (Zip Code)

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ Name of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex M / F

\_\_\_\_\_ Name of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex M / F

\_\_\_\_\_ Name of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex M / F

Verterinarian's Name: \_\_\_\_\_

Verterinarian's Address: \_\_\_\_\_

Verterinarian's Phone No.: \_\_\_\_\_

Veterinarian's Vaccination Tag Number: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Owner or Keeper)

**LICENSE CERTIFICATE**

CITY TAG NUMBER: \_\_\_\_\_

FEE: \$5.00 per pet

DATE OF TAG & CERTIFICATE ISSUANCE: \_\_\_\_\_

BY: \_\_\_\_\_

**VALID FOR ONE YEAR**

**City of Oak Ridge North**

27424 Robinson Road • Oak Ridge North, Texas 77385

(281) 292-4648 ext.301 • Fax (281) 367-7729