



# CODE ENFORCEMENT DIVISION 2018 Pet Registration/Vaccination Application

**Hualapai Law & Order Ordinance 15.2 (h)**

## Owner Information ( Please write clearly )

Name of Owner: ( Owner MUST be 18 yrs. of age)		Date:
Secondary Owner:		
Mailing Address of Owner:		Telephone:
City:	State:	Zip:
Check box which your applying for: <input type="checkbox"/> Registration <input type="checkbox"/> Vaccination (\$10.00 per shot, per animal)		

## PET #1 INFORMATION ( Please write clearly )

<b>\$10.00 LICENSE FEE</b>	
Name of Animal:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Physical Address:	
<input type="checkbox"/> Dog <input type="checkbox"/> Cat	Breed Type: <span style="float: right;">Age:</span>
Color(s):	
Other distinctive marks:	

## PET #2 INFORMATION ( Please write clearly )

<b>\$10.00 LICENSE FEE</b>	
Name of Animal:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Physical Address:	
<input type="checkbox"/> Dog <input type="checkbox"/> Cat	Breed Type: <span style="float: right;">Age:</span>
Color(s):	
Other distinctive marks:	

**Animals are limited to TWO (2) per residence.**

I understand that I will be held responsible for all violations of the Hualapai Animal Control Ordinance on the Hualapai Reservation, involving the above animals described.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

Approved  Disapproved  Reason for Disapproval: \_\_\_\_\_

ACO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

It is the dedication of the Hualapai Animal Control Program to provide the upmost professional service to the Hualapai People with the emphasis in Animal care and public safety.