

## City of Kalama **Dog License Application**

CIRCLE ONE

Application

License Year: 2023

Receipt Number: New

MASHINGTON	PO Box 297 • Kalama, WA 98625 (360) 673-4908 • apclerk@cityofkalama.com www.cityofkalama.com			Renewal	Approved	By/Date:
Owner's Name				Veterinarian (	Clinic	
Mailing Address				Veterinarian Phone		
Physical Address		Email		Dog License Pricing: Spayed or Neutered: \$15.00		
Phone Number		Rabies Expiration***		Unaltered: \$3		\$30.00
					newals Only ary 31 <sup>st</sup> Abo Double	
Dog's Name	Breed	Colors	Gender	Altered?	Microchip #	
*** A copy o	f vour dog's rabies	certificate is nee	ded before a	license can be	issued ***	

Office Use Only:						
Tag Number	Dog's Name	Rabies Expiration Date				

This form can be completed, and payment submitted online at www.cityofkalama.com. Select "Pay a Bill Online" on the City's home page, then select "Dog License", and you will be guided through the payment process. If you are mailing your renewal, please send the completed form and a check payable to the City of Kalama, PO Box 1007, Kalama, WA 98625. After processing, you will be sent the dog license(s). If you have any questions or need additional information, please call the office at (360) 673-4908 or email apclerk@cityofkalama.com.

Thank you!

THIS LICENSE EXPIRES ON DECEMBER 31<sup>ST</sup> OF THE CURRENT YEAR