

City of Williston Animal License

Owners Name \_\_\_\_\_

Address \_\_\_\_\_

Home # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Work # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Name of Animal \_\_\_\_\_ Breed \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Vet's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Rabies Tag # \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*For Office Use Only\*\***

City License # \_\_\_\_\_ Date: \_\_\_\_\_ Issued by \_\_\_\_\_

*Williston Code Enforcement 07/2014*