Trinity County Animal Shelter

570 Mountain View / P.O. Box 1228Weaverville Ca 96093
(530) 623-1370

Door	Dog	Owner:
Dear	Dog	Owner.

Our records show that your dog (s) is not currently licensed and not current on their rabies vaccinations. It is a law that all dogs must be current on their rabies vaccination and licensed in the county that you reside in.

Plus, your dog(s) license will make it possible for us to contact you if your pet becomes lost or injured. All funds received from the license fee will help feed and care for our shelter strays.

1 year license fee: \$10.00 spay/neutered or \$20.00 unaltered. 3 year license fee: \$25.00 spay/neuter or \$50.00 unaltered

You can only license your dog for 3 years if this is the dog's second rabies vaccination.

A citation for an unlicensed dog far exceeds the cost of a license.

Please mail proof of current rabies vaccination and proof of spay/neuter if altered to: Trinity Animal Control, P.O. Box 1228 Weaverville, CA 96093

Dog name		
Breed	Color	
Age	Sex	altered or fertile

Please fill out the back of this form.

(No proof letter)

To avoid a citation please license your dog!!

OWNER / OTHER DOGS INFORMATION: (ALL information MUST be filled out)

Owner's Name	DL#			
Mailing PO Box	_City	Zip		
Physical Address				
Home Telephone #	Alternate Ph	Alternate Ph#		
If you have another dog(s) that is not li	censed please fill out:			
#2 Dog Breed	Male or Female	Altered ?Date Altered		
Dog Name		Age		
Color: Black Red White Tan Bro	wn Gray Chocolate Other			
#3 Dog Breed	Male or Female	Altered ?Date Altered		
Dog Name		Age		
Color: Black Red White Tan Bro	wn Gray Chocolate Other			
#4 Dog Breed	Male or Female	Altered ?Date Altered		
Dog Name		Age		
#5 Dog Breed	Male or Female	Altered ?Date Altered		
Dog Name		Age		
MAIL TO: Trinity County Animal Shelter		ME TO: ty Animal Shelter		

Attn: Animal Control P.O. BOX 1228 Weaverville, CA

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