



Washington County Dog License Application

New License Renewal License License # _____ Exp ____/____/____

Last Name _____ First Name _____

Address _____ Apt# _____

City & State _____ Zip Code _____

Primary Phone _____ Secondary Phone _____

Email address _____

Dog's Name _____ Male Female Sterilized*

Birthdate/Age _____ Color(s) _____ Breed(s) _____

Size: Small (0-20 lbs.) Medium (21-60 lbs.) Large (61-90 lbs.) X-Large (91+ lbs.)

Microchip? Yes No Microchip# _____

Rabies Vaccination* Expiration Date: ____/____/____ Vet Clinic _____

(*Must include proof of rabies vaccination and spay/neuter for license to be valid)

Dog License Fees (Please check what type of license you are purchasing)

	1 year	2 year	3 year
Sterilized dog	\$31 _____	\$51 _____	\$72 _____
Fertile dog	\$51 _____	\$95 _____	\$136 _____
Sr. Citizen**	\$22 _____	\$37 _____	\$54 _____

(**Persons 65 years or over with sterilized dog)

\$5 Replacement Metal Tag _____

(Complementary license tag is issued if this is a first-time license)

\$12 Late/delinquent Fee _____

Total Payment Included: \$ _____

Print this form, fill it out and mail with payment or bring it to the address below (do not email or fax).

If paying by check, please make it payable to: Washington County Animal Services

Department of Health & Human Services • Animal Services Division

1901 SE 24th Avenue, MS 53, Hillsboro, OR 97123

Phone: (503) 846-7041 • Fax: (503) 846-7074 • Email: Animal_Services@washingtoncountyor.gov