

Summit County Pet License Form

To obtain additional forms you can go online to summitcountyco.docupet.com/offline.

Unless otherwise specified, this form must be completed in its entirety.



Contact Information

First Name		Last Name	
Email Address (Optional: required for online account and electronic renewal reminders)			
Telephone	Phone Type	*DOB (MM/DD/YYYY)	
	<input type="radio"/> Home <input type="radio"/> Mobile <input type="radio"/> Work		

*DOB is required to determine eligibility to receive senior citizen discounts.

Mailing Address

Street Number	Street Name	Unit or Apartment	City	ZIP Code
---------------	-------------	-------------------	------	----------

If your mailing address is not the physical address for your pet, you must complete the Physical Address section below.

Physical Address

Street Number	Street Name	Unit or Apartment	City	ZIP Code
---------------	-------------	-------------------	------	----------

Pet Information

Pet's Name		Pet's Breed		Pet's DOB (MM/DD/YYYY)
Sex	Spayed/Neutered	Microchipped	If yes, provide microchip number	
<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No		
Color	Veterinary Clinic	Tag Size		
		<input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches)		

License Type

- | | |
|--|---|
| <input type="radio"/> 1 Year Sterilized Dog License \$15.00 | <input type="radio"/> 1 Year Voluntary Sterilized Cat License \$15.00 |
| <input type="radio"/> 3 Year Sterilized Dog License \$40.00 | <input type="radio"/> 1 Year Unsterilized Cat License \$50.00 |
| <input type="radio"/> 1 Year Unsterilized Dog License \$50.00 | <input type="radio"/> 1 Year Senior License \$5.00 |
| <input type="radio"/> 3 Year Unsterilized Dog License \$150.00 | |

* Pet owners must be 65 or older to qualify for senior citizen rates.

Payment & Donation

Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of	Sum Received
<input type="radio"/> \$5 <input type="radio"/> \$10 <input type="radio"/> \$25 <input type="radio"/> \$50 <input type="radio"/> \$100 <input type="radio"/> \$250	\$
Payment Type	
<input type="radio"/> Check	

Who do I make a check out to?

Please make checks payable to DocuPet

Where do I mail this form?

DocuPet
15 Technology Pl
Suite 1
East Syracuse NY 13057

Required Documentation

You are required to provide a copy of your pet's rabies certificate. Note that document submissions will not be mailed back to you.