

Pierce County Auditor's Office



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PET LICENSE APPLICATION/RENEWAL

OWNER INFORMATION

TAG #

NAME			
PRIMARY PHONE #		ALTERNATE PHONE #	
EMAIL ADDRESS		DATE OF BIRTH	
LOCATION ADDRESS			
CITY		STATE	
			ZIP
MAILING ADDRESS (IF DIFFERENT)			
CITY		STATE	
			ZIP

NEW LICENSE RENEWAL

PET INFORMATION

PET NAME		SPECIES	<input type="radio"/> Dog <input type="radio"/> Cat
BREED		AGE	
SEX	<input type="radio"/> Male <input type="radio"/> Female	ALTERED (SPAYED/NEUTERED)	<input type="radio"/> Yes <input type="radio"/> No
COLOR		MICROCHIP #	

FEE COLLECTED

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