

<b>APPLICATION FOR DOG LICENSE</b> MAX 2 Dog Licenses per property	
<b>OWNER INFORMATION</b> First & Last Name of Owner (One Owner):	
Mailing Address (Including Postal Code):	
Rural Address (Physical Address):	
Tel. (Home):	Tel. (Cell):
Email:	
<b>DOG INFORMATION</b> Name of Dog:	
Breed of Dog:	
Color & Markings & Other identifiable traits:	
Tattoo # _____ Microchip # _____      Picture submitted:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>**Required**</b>
Altered: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Birth: _____	
<b>**If you have more than two(2) dogs, you must fill out a Dog Over-Limit Form**</b>	
The above information is true and correct, to the best of my knowledge.	
Signed: _____	Dated: _____
Office Use Only: Tag # _____	Picture received: <input type="checkbox"/> Y <input type="checkbox"/> N Issued On: _____



**Westlock**  
COUNTY

growing opportunity

10336 106 Street, Westlock AB, T7P 2G1 Tel:  
780-349-3346  
Email: [enfcomplaints@westlockcounty.com](mailto:enfcomplaints@westlockcounty.com)  
[www.westlockcounty.com](http://www.westlockcounty.com)

<b>Payment Form</b>		
Dog License Rates: (pursuant to Bylaw 55-2024)		
DESCRIPTION	Neutered Male or Spayed Female Dog	Unaltered Male or Female Dog
License Fee:	\$15	\$30
Dangerous Dog Licensing Fee:	\$250	\$500
Replacement Tag:		\$5
I hereby authorize Westlock County to debit my:		
<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Debit Card <input type="checkbox"/> Master Card <input type="checkbox"/> VISA		
In the amount of: _____ for a Dog License.		
Credit Card Number: _____		
Name as it appears on card: _____		
Expiry Date: _____ CVC # _____		
Signature: _____		

The information collected on this document will be used for the purposes allowed under the authority of the Municipal Government Act to process your application. The personal information that you provide may be made public, subject to the provisions of the Freedom of Information and Protection of Privacy Act Section 33(c). Questions regarding the collection and use of this information can be directed to the Westlock County FOIP Coordinator at 780-349-3346.