Eureka County Sheriff's Office

Application for Eureka County Dog License

Eureka County Code 6.20.050

Owner's Name:	Phone Number:	
Physical Address: _		
Mailing Address: _		
Animal Name:	Breed:	Sex:
Spayed/Neutered	Y / N Microchip number: _	
Color(s):	Age:	
	Rabies Informatio	n:
Vet:	Rabies #:	
Inoculation Date:	Inoculation Expiration:	
	For Office Use onl	
New:	Renewal:	Current Tag #
Issue Date:	Expiration Date (1 year):	
Fe	ee Paid: \$5 spayed/neutered	\$10 Unaltered
Collected by:		Date:

Entering deputy: Scan this form and rabies certificate into animal record. Provide original application as receipt to owner and return rabies certificate.