HENDERSON POLICE DEPARTMENT

ANIMAL CONTROL BUREAU

D		1 0	
I lear	Anım	12 I ()	wner:
Dear	Δ IIIII	ıaı O	, vv i i C i .

Below is an application to license your pet. Please fill out the application, enclose a copy of your **rabies vaccination** certificate, proof of **sterilization** and a **check** for the appropriate amount. The rabies vaccination must have **at least 6 months remaining** in order to obtain a pet license. Please make checks payable to the "City of Henderson". To apply by mail, please mail to: City of Henderson, Animal Control Bureau, P. O. Box 95050, Henderson NV 89009-5050.

If you wish to obtain your license immediately, you may do so at the following locations:

Henderson Animal Shelter 300 E. Galleria Drive Mon–Sat 9:00am – 5:00pm Henderson City Hall (Finance Cashiers)

240 Water St. *Only if spayed or neutered*

Mon-Thurs 7:30am – 5:30pm

If you have any questions, please contact the animal shelter at 267-4970

Henderson Animal License Application

Circle one: Dog	Cat	Ferret		Animal name_			
Owners Name			Phone				
Address				Apt/Space		_ZIP	
Circle One: Male	Fema	le	Neutered	Spayed			
Breed			Color				
Veterinarian Name				P	hone		

P. O. Box 95050 Henderson NV 89009-5050 (702) 267-4970