



ANIMAL CONTROL PERMANENT IDENTIFICATION

FOR OFFICE USE ONLY
FILE NO. H1/15
OWNER NO:
CRM

Canine [] Other [] Male [] Female []

Animal's Name: Animal #

Registration Number:

Breed:

Colour:

Identifying Features:

Owner's Full Name:

Owner's D.O.B:

Address:

Phone: Cellphone:

Microchip Number: AFFIX STICKER

Date of Implantation: / /

I agree that the above information may be transferred to the national data base.

Signed: Date: (Owner or Agent)

Signed: Date: (Animal Control Officer)

[] Pound Fee of \$50 Impoundment Number:

[] Community Fee of \$25 Cash Only