



Pet Licence Application

Application Instructions

Requirements

In order for us to process this application, you must:

- Be at least 18 years old
- Enclose cheque with your application made payable to "Village of Halkirk"

Restrictions

You must apply in person if any of the following situations apply:

- Your dog is "Restricted" or is "Nuisance" as defined under the Animal Licensing and Control Bylaw
- You are applying for a Guide/Assistance dog exemption.
- 2 year licence not available to the above listed restrictions as well as: pets in the annexed area, or you have not yet spayed or neutered your pet but plan to in the next year.

Information to have on hand:

You will be asked to provide the following information on the application. This information is helpful in properly identifying your pet:

- The birth date of your pet or an approximation
- Your pet's microchip or tattoo number, if applicable
- Whether your pet is spayed or neutered, the date of surgery and clinic and where surgery was performed (if available).

Fees

Please note that Pet Licence fees are non-refundable and non-transferable once paid.

Please note GST is applicable to all fees.

	Cats		Dogs	
	1 year	2 year	1 year	2 year
Spayed /Neutered	\$ 15	\$ 30	\$ 15	\$ 30
Non-spayed/non-neutered	\$ 25	\$ 50	\$ 25	\$ 50
Nuisance dogs (2 year licence not available)	n/a	n/a	\$ 100	n/a
Restricted dog (2 year licence not available)	n/a	n/a	\$ 100	n/a
Replacement tag	\$ 10	\$ 10	\$ 10	\$ 10

Applications can be mailed to the Village office or dropped off in person at the Village Office with a Cheque payable to the Village of Halkirk (post-dated cheques are not accepted)

WARNING: It is an offence to provide false information under the Animal Licensing and Control Bylaw 006-2022.

This personal information is collected under the authority of Section 33(c) of the Freedom of information and Protection of Privacy Act (Alberta).

It will be used as required for pet licensing, bylaw enforcement, and to reunite lost pets with their owners. If you have given your express written consent, the personal information on this form may be shared with individuals, your emergency contacts, animal rescue organizations and veterinary staff for the purpose of reuniting lost pets with their owners. If you have any questions regarding the collection, use, disclosure, or destruction of the personal information on this form, contact the CAO, 403 - 884 - 2464.

Pet Licence Application

Owner Information

All mandatory fields are denoted by an * and not providing the required information will prevent the application from being accepted.

Applicant Information (Pet Owner)

Last Name *	First Name *	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Phone*	Secondary Phone	Other Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email

Main Address

House Number *	Street Address *	Suite	Postal Code *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing Address (If different than the main address above)

Last Name	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>

House Number	Street Address	Suite
<input type="text"/>	<input type="text"/>	<input type="text"/>

City	Province/State	Postal/Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Co - Owner Information

Last Name	First Name
<input type="text"/>	<input type="text"/>

Primary Phone	Secondary Phone	Other Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

1 year licence

2 year licence

* I confirm that I am at least 18 years old (the bylaw requires that the applicant must be 18 years or older to licence a pet).

I do **NOT** want the Animal Care & Control Centre to release my first name and phone number to someone who has found my pet.

Senior Citizen Discount: I confirm that I am at least 65 years of age (you may be entitled to a discount for one spayed or neutered pet).

Emergency Contacts: Please provide the names and phone numbers of up to two trusted friends or family members that we can release your pet to if necessary.

Emergency Contact 1

Last Name	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Phone	Secondary Phone	Other Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Emergency Contact 2

Last Name	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Phone	Secondary Phone	Other Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

WARNING: It is an offence to provide false information under Section 2.9 of the Animal Licensing and Control Bylaw 006-2022. This personal information is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act* (Alberta). It will be used in the operation of the Pet Licence Program, for bylaw enforcement purposes and shared with outside organizations for the purpose of reuniting lost pets with owners. If you have any questions about this collection, contact the Chief Administrative Officer, Animal Services, at 403 - 884 - 2464. If you wish to provide feedback on the Pet Licence Program, please send your comments to the email address: CAO@villageofhalkirk.ca.

Pet Licence Application

Pet Information

All mandatory fields are denoted with an *. Not providing the required information will prevent the application from being submitted.

* Dog:	<input type="checkbox"/>	* Cat:	<input type="checkbox"/>	* Male:	<input type="checkbox"/>	* Female:	<input type="checkbox"/>
* Pet's Name:	<input type="text"/>						
* Pet's Date of Birth:	<input type="text"/>	(Approximate date is accepted)					
* Primary Breed:	<input type="text"/>						
Secondary Breed:	<input type="text"/>						
* Primary Markings:	<input type="text"/>						
* Primary Colour:	<input type="text"/>						
Secondary Colour:	<input type="text"/>						
Third Colour:	<input type="text"/>						
Microchip Number:	<input type="text"/>						
Tattoo ID:	<input type="text"/>						
* Has your pet been spayed or neutered ?							
<input type="checkbox"/> Yes	Veterinary Clinic: <input type="text"/>						
	Surgery Date: <input type="text"/>						
<input type="checkbox"/> No, my pet is not spayed or neutered							
<input type="checkbox"/> No, but I intend to have my pet spayed or neutered							

* Dog:	<input type="checkbox"/>	* Cat:	<input type="checkbox"/>	* Male:	<input type="checkbox"/>	* Female:	<input type="checkbox"/>
* Pet's Name:	<input type="text"/>						
* Pet's Date of Birth:	<input type="text"/>	(Approximate date is accepted)					
* Primary Breed:	<input type="text"/>						
Secondary Breed:	<input type="text"/>						
* Primary Markings:	<input type="text"/>						
* Primary Colour:	<input type="text"/>						
Secondary Colour:	<input type="text"/>						
Third Colour:	<input type="text"/>						
Microchip Number:	<input type="text"/>						
Tattoo ID:	<input type="text"/>						
* Has your pet been spayed or neutered ?							
<input type="checkbox"/> Yes	Veterinary Clinic: <input type="text"/>						
	Surgery Date: <input type="text"/>						
<input type="checkbox"/> No, my pet is not spayed or neutered							
<input type="checkbox"/> No, but I intend to have my pet spayed or neutered							

Note:

- If you have more than 2 pets, please print additional copies of this page.
- By submitting this application, you declare that to the best of your knowledge, the information you have provided in this application is complete and accurate.
- Your pet tag(s) will be mailed to you once your payment is received.