



# VILLAGE OF MOUNT PLEASANT

## Pet Fancier Permit Application

1-Year License - Expires December 31st Each Year - Renewal Period Jan 1 - Apr 1

**Circle One:** New | Renewal Previous Year Permit #: \_\_\_\_\_ \$35.00 Permit Application Fee

Each pet must be individually licensed in addition to the Pet Fancier Permit

### OWNER INFORMATION: PLEASE PRINT

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ Mount Pleasant, WI Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date of Birth (if 65 or over): \_\_\_\_\_

Any person who resides in a single-family dwelling may apply for a pet fancier permit to allow such person to provide permanent shelter for up to seven pets. Residents of multiple-family units are only allowed two animals per unit, and may not be issued a pet fancier permit. The applicant must not be in violation of any Animal State Statutes, Chapters 174 or 951 or Village Ordinances. Complaints received will require an inspection of the premises by the Health Department, with no advance notification, and can result in loss of permit if violations are found. All animals must be maintained according to the current State Statutes and local ordinances.

### ANIMAL INFORMATION: PLEASE PRINT

Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
Breed: _____					Expiration Date: _____
Color: _____ Fee: \$ _____					Veterinarian: _____

Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
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Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
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Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
Breed: _____					Expiration Date: _____
Color: _____ Fee: \$ _____					Veterinarian: _____

Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
Breed: _____					Expiration Date: _____
Color: _____ Fee: \$ _____					Veterinarian: _____



# VILLAGE OF MOUNT PLEASANT Pet Fancier Permit Application

(continued)

### ANIMAL INFORMATION: PLEASE PRINT (continued)

Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
Breed: _____					Expiration Date: _____
Color: _____ Fee: \$ _____					Veterinarian: _____

Dog <input type="checkbox"/>	Cat <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Spayed/Neutered <input type="checkbox"/>	Rabies Manufacturer: (Circle One) BoehringerIngelheim ELANCO FortDodge Merck Merial Pfizer Zoetis Unknown
Animal Name: _____					Rabies Serial/Lot #: _____
Breed: _____					Expiration Date: _____
Color: _____ Fee: \$ _____					Veterinarian: _____

**•Cash or Check ONLY.**

- Please make checks payable to Village of Mount Pleasant.
- The license, tag and proof of rabies vaccination **MUST** accompany this form.
- Acceptable proof is the "Rabies Vaccination Certificate" you received when the vaccination was performed.
- Do not send metal rabies tags or receipt of services.
- If renewing after April 1, please include any applicable late fees.

Individual License Fees
\$ _____
+Pet Fancier Permit Fee \$35.00
<b>Total Fees Due: \$ _____</b>

**I hereby certify that I am not in violation of any Animal State Statutes, Chapters 174 or 951; or Village Ordinances, Chapter 10-3. I have not been convicted of cruelty, neglect, or mistreatment of any animal. I understand that this permit may be revoked if any of the supplied information is found to be false.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

### FOR OFFICE USE ONLY

Return Completed Form & Payment to: Mount Pleasant Village Clerk Attn: Pet Licensing 8811 Campus Dr Mount Pleasant, WI 53406  <b>Questions:</b> Village Hall Main Line: 262-664-7800 Option 3 Email: clerk@mtpleasantwi.gov	License Numbers: _____  _____  _____	Date Received Stamp
	Permit Number: _____-_____	
	Cash / Check    Check # _____	