





North Richland Hills Animal Adoption & Rescue Center


The City of North Richland Hills requires that **ALL DOGS AND CATS** four (4) months of age and older obtain and have attached to their collar a City License tag.

The purpose of the City License is to provide the owner information and pet's rabies vaccination status in the event that the pet becomes lost or is involved in a bite.


BENEFITS OF A CITY LICENSE:


 It's required by law!


 In the event your pet is impounded by the Animal Services Division for the first time and your pet is current on its rabies vaccination and is wearing a current city license tag, he/she will be returned to you at a 50% reduction in the impoundment fees.

 Pets wearing current City License tags will be held in the Animal Adoption & Rescue Center for an additional three (3) days beyond the required four (4) days and attempts will be made to contact the owner.

IMPORTANT TIPS:

 It is important that you visit the Animal Adoption & Rescue Center as soon as you realize your pet is lost.

 Remember City License does your pet no good in the kitchen drawer at home! It can be your pet's "phone call home!"

 Due to the volume of animals in the, Animal Adoption & Rescue Center, owners are required to visit the Center in person to look for their lost pets and to make arrangements to pick them up. To view animals at the Center please visit <https://www.nrhtx.com/93/Lost-Found>.

For more information contact the NRH Animal Adoption & Rescue Center at:
(817) 427-6570



North Richland Hills Pet License Application

PET OWNER'S INFORMATION

Please print all information

Name			
Last:	First:	M.I.	Signature:
DL or ID#:	Issuing State:	Date of Birth:	
Email:			

Address		
Street:	City:	Zip:
Home #:	Work #:	Date:

Emergency Contact Other than Owner or Person Residing at Address			
Last:	First:	M.I.	Phone Number:

PET INFORMATION

Type (check one)			
<input type="checkbox"/> Dog	<input type="checkbox"/> Cat	<input type="checkbox"/> Other (specify) _____	
Sex (check one)			
<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutered Male	<input type="checkbox"/> Spayed Female
Identifiers			
Pet's Name	Breed(s)	Color(s)	Age
Microchip #:			

RABIES INFORMATION

Veterinarian and Vaccine Information:			
<input type="checkbox"/> 1-Year Vaccine	<input type="checkbox"/> 3-Year Vaccine	Clinic/Veterinarian Name:	
Rabies Tag #:	Vaccination Date:	Vaccination Expires:	Vaccine Lot #/ Vaccine Expiration Date:

FEES: Unaltered: \$32.00 Altered: \$10.00 Replacement Tag: \$6
Senior Residents (65+) with Altered Pet: No Fee

****One Application Required for Each Pet****