



PET LICENSING

619 DIVISION STREET MS-45, PORT ORCHARD WA 98366-4682
(360) 337- 4629 FAX (360) 337-4645



Pet License Tag Replacement Application

Owner Information

Last Name		First Name
Mailing Address		
City	State	Zip
Message Phone		
Email Address		

Tag Replacement Fee	\$ 2.00 Each
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Pet Name	Breed	Color	Sex	Spayed/ Neutered	Current Tag #

DONATIONS: If you would like to make a donation to the **Kitsap Humane Society**, please include your donation with your payment and indicate the specific amount of your donation. All donations will be forwarded to the Kitsap Humane Society. You will receive confirmation / receipt of your donation within 2 – 3 weeks.

Mail: Return this application along with with your payment to the address above.

Kitsap Humane Society Donation \$ _____

In-Person: Kitsap County Auditor's Office
619 Division Street,
Port Orchard, WA 98366

Total Amount Enclosed \$ _____