

**City of Mendota Heights  
Application for Dog License**

<b>Owner's Name:</b>	<b>Address:</b>
<b>Home Phone:</b>	<b>Work Phone:</b>
<b>Animal Name:</b>	<b>Breed</b>
<b>Color</b>	<b>Sex:</b> Neutered    Yes    No Spayed      Yes    No

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**Remit Application, Payment and Proof of Rabies Innoculation To:  
City of Mendota Heights  
1101 Victoria Curve  
Mendota Heights, MN 55118**

**Office Use Only**

<b>License #:</b>	<b>Rabies Expires:</b>
<b>Issue Date:</b>	<b>Receipt #:</b>