

# City of Green Isle

310 McGrann Street  
P.O. Box 275  
Green Isle, Minnesota 55338  
Phone: (507) 326-3901 Fax: (507) 326-3192  
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Website: [www.cityofgreenislemn.org](http://www.cityofgreenislemn.org)

## 2021 ANIMAL LICENSE APPLICATION

APPLICATION DUE DATE: **No Later Than JANUARY 31st of Each Year**  
License Year: January 1st to December 31<sup>st</sup>, 2021

**Return this Form, with PROOF of the Animal's RABIES Vaccination, and the License Fee to City Hall**

Fee: \$10.00 per year

**\*IF YOU NO LONGER OWN AN ANIMAL THAT WAS PREVIOUSLY LICENSED,  
PLEASE CALL CITY HALL SO THAT WE CAN UPDATE OUR RECORDS.\***

|                                       |                       |  |  |   |
|---------------------------------------|-----------------------|--|--|---|
| <b>Pet's Name:</b>                    |                       | <b>Breed:</b>  |  | <b>Cat / Dog</b> (circle one)                       |
| <b>Color/Markings:</b>                |                       | <b>Sex:</b>  | <b>Male / Female</b><br>(circle one)                                 | <b>Spayed or Neutered?</b> Yes / No<br>(circle one) |
|                                       |                       |  | <b>Fee:</b> 10.00 - Spayed/Neutered<br>\$10.00 - NOT Spayed/Neutered |   |
|                                       |                       |  | <b>2021 TAG # :</b> _____  |   |
|                                       |                       |  | <b>Paid Via:</b> Check # _____ or CASH _____                         |   |
| <b>* Vaccination Expiration Date:</b> |                       | <b>* Please Provide a Copy of Current RABIES Vaccination</b> |  |   |
| <b>Name:</b>                          |                       |  |  |   |
| <b>Address:</b>                       |                       |  |  |   |
| <b>City, State, Zip:</b>              | Green Isle, MN, 55338 |  |  |   |
| <b>Phone Number:</b>                  |                       |  |  |   |
| <b>Cell Number:</b>                   |                       |  |  |   |

- Check your application to ensure all information is correct. Please make any changes necessary.
- If the pet's rabies vaccination is expired, you will be required to provide a current rabies certificate.
- If your animal has been spayed or neutered, and it is not indicated on this application, please bring proof obtained from your veterinarian.

**BY APPLYING FOR THIS ANIMAL LICENSE, I AGREE TO:**

- Limit the number of dogs & cats, combined, to THREE Total Pets
- Promptly clean up my animal(s) waste
- Stop my dog from annoying barking, howling, or whining
- Keep my animal(s) on my property
- Leash my dog when on a walk

Please call (507) 326-3901  
if you have questions.

**Please Sign & Date Below:**

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)