

SCHEDULE "I"

Animal License Application Form Form required for Licensing of Animals pursuant to the By-law.

CITY OF IQALUIT

New Application Yearly Ren	ewal Replacement tag Handicapped Owner
ANIMAL LICENSE	
DATE:	
	FIRST NAME:
MANA DON DE SPETCH AND	FIRST NAME:
PROOF OF IDENTIFICATION	DRIVERS LICENSE #/IDCARD #:
www.ymik.ea.zon.xviir	
HSE #:	PO BOX #:
	gran dir medicak samut
PHONE #:	OTHER PHONE #:
LICENSE FEE RECEIVED:	
ISSUER DA	ATE
LILANE DE AD THE DEVENCE O	IDE INFORMATION FOR DOG OWNERS
I HAVE KEAD THE KEVERSE S	IDE INFORMATION FOR DOG OWNERS
SIGNATURE OF OWNER	DATE