



**Tzeachten Lands Office**  
 #29 – 6014 Vedder Road  
 Chilliwack, BC V2R 5M4  
 604-846-4888

**Animal Control Facility**  
 44820A Wolfe Road  
 Chilliwack, BC V2P 8A8  
 604-795-4638  
[animalcontrol@fvrd.bc.ca](mailto:animalcontrol@fvrd.bc.ca)

## DOG LICENCE APPLICATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone # \_\_\_\_\_

Breed: \_\_\_\_\_ Colour: \_\_\_\_\_ Dog's Name: \_\_\_\_\_

Licence Fees (*check all applicable*)

\* Proof of spaying or neutering is required. Please submit a veterinary certificate. If you do not have one, please complete a

Verification of Dog being Spayed or Neutered form (see below).

- Male       Neutered\*       Hobby Kennel       Replacement Tag       Exempt  
 Female       Spayed\*       Nuisance Dog       License Transfer       Dangerous/Aggressive Dog

**Total Amount Received: \$** \_\_\_\_\_

Chip # \_\_\_\_\_ Tattoo # \_\_\_\_\_ Tag # \_\_\_\_\_

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt # \_\_\_\_\_



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## VERIFICATION OF SPAYED/NEUTERED DOG (If applicable)

Please accept this signed statement as verification that my dog \_\_\_\_\_  
 is spayed / neutered.

I am unable to provide proof by means of a certificate from a veterinarian for the following reason:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed: \_\_\_\_\_ Print Name: \_\_\_\_\_

Office use only:

Tag #: \_\_\_\_\_ Staff Signature: \_\_\_\_\_



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**SCHEDULE “A”**  
**DOG LICENSE FEES**

| <b>Category</b>                 | <b>Fee</b> |
|---------------------------------|------------|
| Dog (each)                      | \$70.00    |
| Spayed or Neutered Dog (each)   | \$12.00    |
| Nuisance Dog (each)             | \$ 200.00  |
| Aggressive Dog or Dangerous Dog | \$ 200.00  |
| Breeding Kennel                 | \$80.00    |
| Licence Transfer                | \$5.00     |
| Licence Tag Replacement         | \$5.00     |