

2026

Oak Park Department of Public Safety

Animal License Number _____

Dog/Cat

Date of issue: _____ Date of vaccination: _____ Vaccination expires: _____

Pet's name: _____ Breed: _____ Color: _____

Owner Information

Name: _____

Address: _____

Home phone: _____

Cell phone: _____

Age: _____ Sex: _____

If animal is neutered or spayed, please indicate
female spayed _____ or male neutered _____

Fee: \$ _____ Processed by: _____

This animal license expires Dec. 31, 20 _____

AVOID LATE FEES Renewal period
From October to December 20 _____

I am responsible for maintaining a current rabies vaccination certificate and
may not harbor more than three animals (dogs and/or cats): _____