



Animal Adoption Center

702 N. Grimes
 Hobbs, NM 88240
 575-397-9323

ANIMAL LICENSE APPLICATION

1. You must live within the incorporated city limits of the City of Hobbs.
2. Vaccinations must cover the licensing period.
3. There are **no refunds** for unused time or if the animal is altered during licensing period.
4. Fees are nontransferable.
5. Must provide proof of rabies vaccination that is valid through December 31st of the year the license is issued or have Veterinarian complete the certificate of rabies below.
6. If the animal has been spayed or neutered, have the Veterinarian complete the Sterilization Certification.
7. New animals must be licensed within 30 days of moving into the incorporated city limits of the City of Hobbs.

Please complete the following information, type or print clearly.

Return completed application, proof of vaccinations and/or sterilization along with your payment to the Hobbs Animal Adoption Center.

Owner Information Section

Owner Name: _____ Home Phone: _____
 Address: _____ Work Phone: _____
 E-Mail: _____ Driver's License No.: _____ DOB: _____

Animal Information Section

Name of Animal: _____ Breed: _____ Color: _____
 Sex: M or F Age: _____ DOB: _____ Microchip # _____ Rabies Tag #: _____ Expires: _____

Emergency Contact Information Section

Name: _____ Home Phone: _____
 Address: _____ Work Phone: _____
 City, State & Zip: _____ Cell Phone: _____

Veterinarian Information Section

For City Use Only

Certification of Sterilization

I certify that I am a licensed veterinarian and that this animal is sterilized.

 Doctor's Signature Date

Certification of Rabies Vaccination:

I hereby certify that I am a licensed Veterinarian and on this date the above described animal was vaccinated according with a New Mexico Approved vaccine.

 Doctor's Signature Date

Print Doctor's Name: _____

Doctor's Address: _____

Doctor's Phone No: _____

Manufacturer: _____

Series No: _____ Lot No: _____

License Rate / Fee Information

	Altered	Unaltered	Late Fee
1 year license	<input type="checkbox"/> \$5.00	<input type="checkbox"/> \$15.00	<input type="checkbox"/> \$10.00

Amount Paid: \$ _____

Check One: Cash Check No. _____

Date Paid: _____

Tag No: _____ Receipt No: _____