

SERVICE DOG APPLICATION

Name: _____ Tag #: AD _____
Address: _____ Issued: _____
City: _____ Zip: _____ Phone: _____ Expires: _____
Name of pet: _____
Breed: _____ Color: _____ Gender: _____ Age: _____
How does this service dog assist you? _____

AFFADAVIT

By affixing my signature to this affidavit, I hereby declare I fully understand that Section 365.7 of the Penal Code prohibits any person to knowingly and fraudulently represent himself or herself, through verbal or written notice, to be the owner or trainer of any canine licensed as, to be qualified as, or identified as, a guide dog, signal dog, or service dog, as defined in subdivisions (d), (e), and (f) respectively, of Section 365.5 of the Penal Code and paragraph (6) of subdivision (b) of Sections 54.1 of the Civil Code, and that a violation of Section 365.7 of the Penal Code is a misdemeanor, punishable by imprisonment in a county jail not exceeding six months, by a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and a fine."

Upon the death or retirement of a service dog, the owner or person in possession of the service dog identification tag shall immediately return the tag to the animal control department that issued the tag (AFV).

Signature Date

Rabies information:					
<input type="text" value="VAC TYPE"/>	<input type="text" value="MFGR."/>	<input type="text" value="LOT NO."/>	<input type="text" value="DATE VACC."/>	<input type="text" value="VACC. EXPIRES"/>	<input type="text" value="VACC. BY"/>
Rabies					

Issued by: _____
AFV STAFF INITIAL

Animal Friends of the Valleys
33751 Mission Trail
Wildomar, CA 92595
(951) 674-0618
Attn: Service Dog Dept.