



Village of Cimarron

356B East 9th Street
P.O. Box 654♦ Cimarron, New Mexico 87714
(575) 376-2232♦Fax (575) 376-2810

ANIMAL LICENSE APPLICATION/RENEWAL

Owner: _____
Physical Address: _____
Phone: _____

DATE: _____
Mailing Address: _____

Annual Renewal New Application
Number of animals _____ (list animal(s) below)

1. Name: _____ Breed: _____ Color: _____

Specific markings _____ Canine Feline Male Female

Altered: Spayed Neutered NO Copy of Vaccination Date: _____

Rabies Tag # _____ Village Tag #: _____ Receipt Number _____

2. Name: _____ Breed: _____ Color: _____

Specific markings _____ Canine Feline Male Female

Altered: Spayed Neutered NO Copy of Vaccination Date: _____

Rabies Tag # _____ Village Tag #: _____ Receipt Number _____

3. Name: _____ Breed: _____ Color: _____

Specific markings _____ Canine Feline Male Female

Altered: Spayed Neutered NO Copy of Vaccination Date: _____

Rabies Tag # _____ Village Tag #: _____ Receipt Number _____

4. Name: _____ Breed: _____ Color: _____

Specific markings _____ Canine Feline Male Female

Altered: Spayed Neutered NO Copy of Vaccination Date: _____

Rabies Tag # _____ Village Tag #: _____ Receipt Number _____

*All animals must be properly vaccinated against rabies per Village of Cimarron Ordinance 7-1-22.