Montréal

REGULAR PET PERMIT REQUEST

– 2021 fee schedule –

☐ Renewal ☐ New request ☐ Tag replacement

Applicant information

Last name: _____ First name: _____

Address: _____ Postal code: _____
(street number, street, apt.) (A1 A1A1)

Phone : _____ E-mail: _____

Important notice
Since January 1st, 2020, proof of sterilization and microchipping is required to obtain or renew a permit for dogs or cats older than 6 months.

☐ **I have read and understood the notice.**

Pet 1

Dog ☐ Male ☐
Cat ☐ Female ☐

Name: _____
Year of birth: _____ (yyyy)
Breed: _____
Color: _____
Weight: _____ ☐ lbs ☐ kg

Microchipped *: Yes ☐ No ☐
If not, why?
- Medical reason
- Pet younger than 6 months

If yes, provide the number #: _____

Vaccinated: Yes ☐ No ☐

Spayed/neutered *: Yes ☐ No ☐
If not, why?
- Medical reason
- Breeding animal
- Pet younger than 6 months

Tattooed: Yes ☐ No ☐
If yes, provide the number #: _____

Dog	☐	$ 28
Service dog *	☐	$ 0
Cat	☐	$ 12
Pet adopted from a shelter **	☐	$ 0
Tag replacement	☐	$ 10

$ 0

Pet 2

Dog ☐ Male ☐
Cat ☐ Female ☐

Name: _____
Year of birth: _____ (yyyy)
Breed: _____
Color: _____
Weight: _____ ☐ lbs ☐ kg

Microchipped *: Yes ☐ No ☐
If not, why?
- Medical reason
- Pet younger than 6 months

If yes, provide the number #: _____

Vaccinated: Yes ☐ No ☐

Spayed/neutered *: Yes ☐ No ☐
If not, why?
- Medical reason
- Breeding animal
- Pet younger than 6 months

Tattooed: Yes ☐ No ☐
If yes, provide the number #: _____

Dog	☐	$ 28
Service dog *	☐	$ 0
Cat	☐	$ 12
Pet adopted from a shelter **	☐	$ 0
Tag replacement	☐	$ 10

Uncheck ☐ $ 0

Pet 3

Dog ☐ Male ☐
Cat ☐ Female ☐

Name: _____
Year of birth: _____ (yyyy)
Breed: _____
Color: _____
Weight: _____ ☐ lbs ☐ kg

Microchipped *: Yes ☐ No ☐
If not, why?
- Medical reason
- Pet younger than 6 months

If yes, provide the number #: _____

Vaccinated: Yes ☐ No ☐

Spayed/neutered *: Yes ☐ No ☐
If not, why?
- Medical reason
- Breeding animal
- Pet younger than 6 months

Tattooed: Yes ☐ No ☐
If yes, provide the number #: _____

Dog	☐	$ 28
Service dog *	☐	$ 0
Cat	☐	$ 12
Pet adopted from a shelter **	☐	$ 0
Tag replacement	☐	$ 10

Uncheck ☐ $ 0

Pet 4

Dog ☐ Male ☐
Cat ☐ Female ☐

Name: _____
Year of birth: _____ (yyyy)
Breed: _____
Color: _____
Weight: _____ ☐ lbs ☐ kg

Microchipped *: Yes ☐ No ☐
If not, why?
- Medical reason
- Pet younger than 6 months

If yes, provide the number #: _____

Vaccinated: Yes ☐ No ☐

Spayed/neutered *: Yes ☐ No ☐
If not, why?
- Medical reason
- Breeding animal
- Pet younger than 6 months

Tattooed: Yes ☐ No ☐
If yes, provide the number #: _____

Dog	☐	$ 28
Service dog *	☐	$ 0
Cat	☐	$ 12
Pet adopted from a shelter **	☐	$ 0
Tag replacement	☐	$ 10

Uncheck ☐ $ 0

$ 0

* Proofs is required.
** Permits free the first year if requested within fifteen days following adoption (with supporting documentation).

Montréal

Documents required:

- ☐ The completed form.
- ☐ A photocopy of a valid photo ID and proof of address: See a list of accepted documents at montreal.ca or click here.
- ☐ A cheque made out to **Ville de Montréal** in the total amount of $ 0 . (according to the checked boxes) Upon renewal, should the application be filed after the existing permit has expired, an additional fee of $10 per permit applies and must be added to the total payment amount.
- ☐ Proof of sterilization
- ☐ Proof of microchipping

Documents required, if applicable:

- ☐ A written notice from a veterinarian stating that sterilization is not medically appropriate for the pet.
- ☐ A written notice from a veterinarian stating that microchipping is not medically appropriate for the pet.
- ☐ Proof of breed registration for a breeding dog or cat (see a list of breed associations at montreal.ca or by clicking here).
- ☐ Proof that the dog was trained by a specialized institution to help a person with a disability requiring the assistance of such a dog. Or proof that the dog is undergoing training by a specialized institution.
- ☐ Proof of adoption from a shelter within the 15 days preceding the permit request, or a certificate from the shelter confirming custody for temporary foster care of the animal.

Mailing instructions

Send your completed form, along with a photocopy of the required documents to your borough's point of service.

Mandatory disclosure

I solemnly declare that I reside at the aforementioned address, that I am the owner or legal guardian of the pet(s) described in this form, that I am 16 years or older and that all information provided is accurate.

Signature: _____ Date: _____

Space reserved for the borough