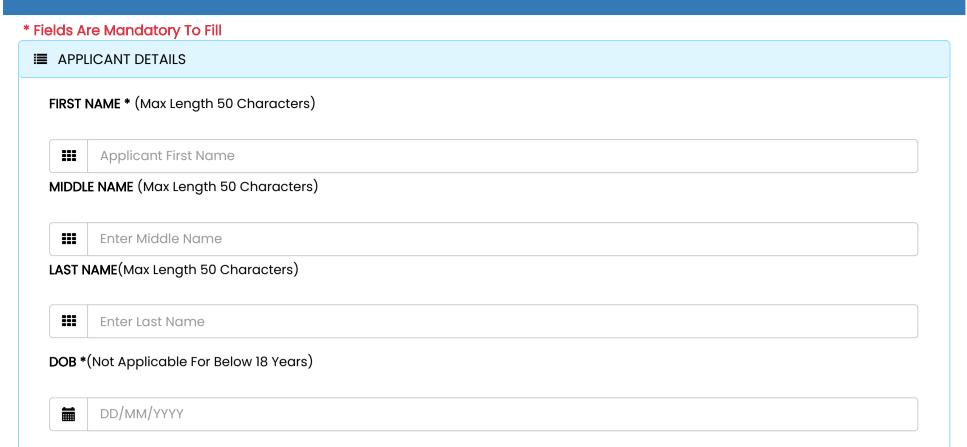
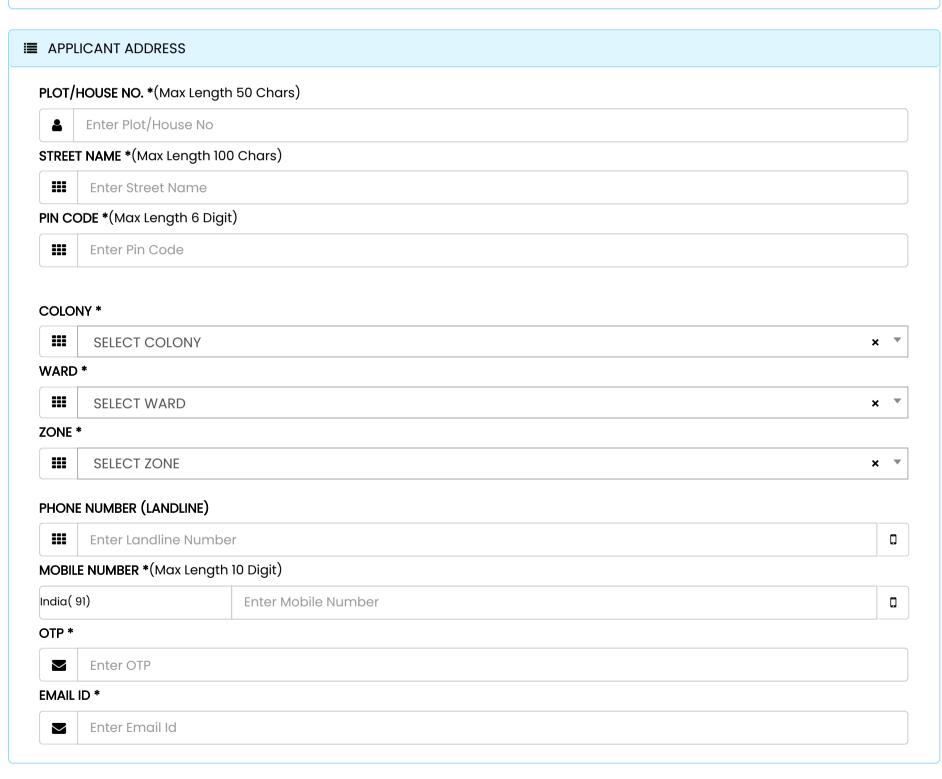
APPLY FOR NEW PET DOG LICENSE





DOG DETAILS NAME OF PET DOG *(Max Length 50 Chars) Lenter name of Pet Dogs GENDER OF PET DOG * Male ○ Female UPLOAD DOG PHOTO *In Jpeg/Jpg Format And Size Should Not Exceed 20 KB) Choose File No file chosen

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■ UPLOAD REQUIRED DOCUMENTS *

Note:

A. Enclosures / Attachments Hereby Applicant Requested To Upload Self Attested Copies Of All The Documents

B. For Uploading Documents Max Size Should Be 2 MB And Scan Copy Should Be PDF Format Only

1. ANTI RABIES VACCINATION CERTIFICATE ISSUED BY REGISTERED VETERINARY PRACTITIONER /HOSPITAL *

Choose File No file chosen

2. APPLICANT ID PROOF *

Choose File No file chosen

3. Applicant Residence Proof *

Choose File No file chosen

4. PHOTOGRAPH OF APPLICANT ALONG WITH PET DOG. *

Choose File No file chosen

■ SELF -DECLARATION/UNDERTAKING

DECLARATION BY THE APPLICANT

- 1. I will not prohibit/obstruct the authorized officer of the Corporation to inspect the premises at any time and without notice.
- 2. I will attach the Dog Token Card to its neck collar all the time. I shall, on demand produce the registration certificate to the authorized officer.
- 3. I will not let loose the dog in any street/road or public places. Pet should always be taken out after properly muzzled and secured with a leash/chain.
- 4. I will not allow an aggressive dog to roam freely without muzzle at any public place. Irresponsible ownership causing severe biting injury shall lead to cancellation of pet dog Registration. In such cases, I will be responsible for proper compensation to the victims
- 5. I will be responsible for all kind of nuisance by my pet viz: howling, biting and injuring any person or others pet.
- 6. I will not allow my pet to defile public places and shall be responsible for cleaning the area if it does so.
- 7. I will provide adequate food and shelter to pet dog and shall not cause any cruelty to it failing which SPCA provisions would be invoked.
- 8. I will be responsible for good health and timely Anti Rabies Vaccination of the pet dog.
- 9. New Registration Certificate & Token for the pet shall be obtained by me annually.
- 10. In case my vaccinated dog is bitten by a RABIES suspected dog during the validity period of registration, I will ensure its proper post- bite vaccination regimen under intimation to DDVS zone, failing which registration shall be cancelled.

11.In case of change of ownership of the pet, I will inform Zonal DDVS to update the records.

12.I hereby indemnify MCD from all legal consequences arising due to violent acts of my pet.

13. Validity of Registration of the pet shall be co-terminus with that of Anti Rabies Vaccination.

14.I will comply with the provisions of Acts & Bye Laws for the time being enforceable.

15.I shall ensure that my pet does not contribute in the growth of Stray Canine population.

SUBMIT

CANCEL

Disclaimer



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