

Owner Information

Owner Name: _____
Last First Initial

Owner Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Phone: _____ Email: _____

Pet Information

Name of Pet	Type of Animal	Gender	Spayed/Neutered	Breed	Colour	Licence No.

Declaration of Pet Sterility

I, the undersigned, solemnly declare that the dog(s) / cat(s) identified in this declaration have been spayed / neutered.

I, the undersigned, hereby declare that all information given on this declaration is true and accurate. By signing this declaration, I understand that falsification of any information could result in penalties or fines identified in Town of Creston Bylaws.

Owner Signature: _____ Print Owner Name: _____

Date: _____

Signed in the presence of:

Witness Signature: _____ Print Witness Name: _____

Approved by Corporate Officer:

Signature: _____

The Town of Creston collects your information for the purposes of administering Town of Creston programs and services, including permits and licensing services, in accordance with Section 26 of the *Freedom of Information and Protection of Privacy Act (FOIPPA)*. Information collected with this form, including copies of any associated documentation submitted as part of this application, may be disclosed to the public in accordance with *FOIPPA*. If you have any questions about the collection and use of information, please contact the Town's Corporate Officer at 250-428-2214, ext. 210.