

TARRANT COUNTY PUBLIC HEALTH ENVIRONMENTAL HEALTH DIVISION

1101 S. Main Street, Suite 2300, Fort Worth, TX 76104 817-321-4960 | FAX 817-321-4961 | *www.tarrantcountytx.gov/health*

System #
Received
Receipt # Check
or Cash

Affidavit 🛛

DANGEROUS DOG Registration Application

This application is valid for one year from the date the fees are received.

New 🛛 Renewal 🖵		MAPSCO #	
Ourser's Nemer			
Owner's Name:			
Site address Where the dog will be kept			
Mailing Address of Owner:			
		Telephone #	
Other phone #	Email		
Site description: Size of property - # of Acres _		Area Fenced	
Building: Living Area Square Footage		Single Family 🛛 or Multifamily 🗅	
Total area available to anima	l(s)		
Animal's Identification "Chip" Nun	nber	Species/Breed	
Insurance policy: Company		Number	
Amount	0		
Veterinarian	Phor	ne	
Proof of Vaccination Date of	f Vaccination	Certificate #	
other citizens that they and their property undersigned, hereby grant access to the p	are safe from harm roperty, for purposes	ntaining of the dogs in a humane manner that will assure as a result of this animals behavior. Furthermore, I, the of inspecting the care and supervision of the registered partment and the Tarrant County Sherriff and Deputies.	
Owner's Signature		Date	
Action	For office us	e only Initials Date	