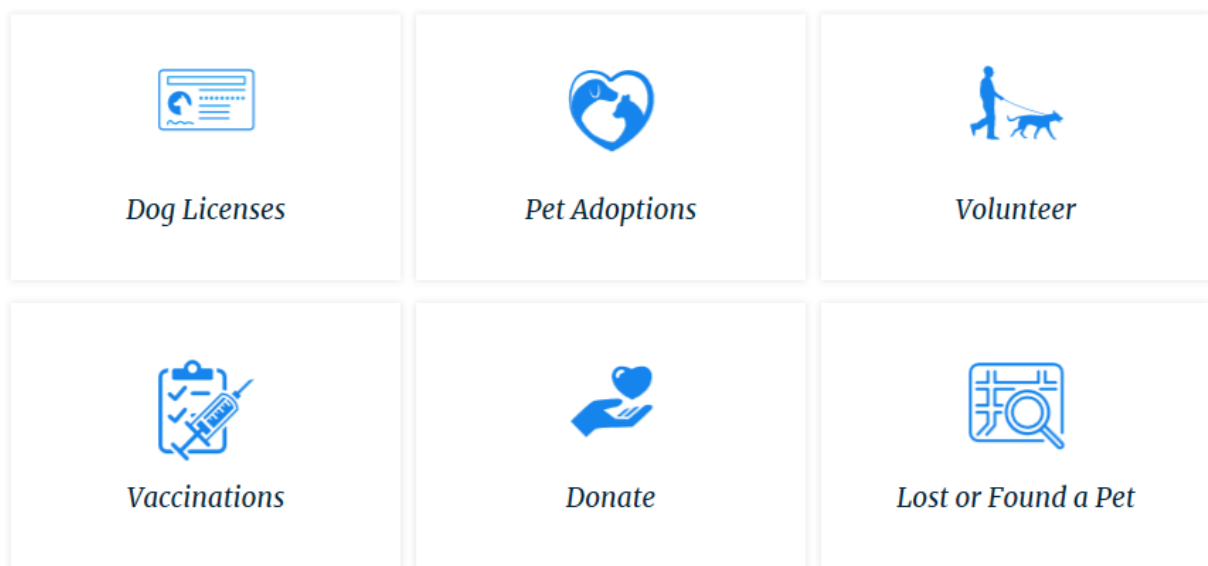


How to Register and Apply for Your Dog's License Online

This step-by-step guide will assist you with our online registration process for getting your dog's first license through Maricopa County Animal Care and Control (MCACC). If at any time you have questions, please contact us by phone at 602-506-7387 (option 5, then option 3) or email your inquiry to Licensing@Maricopa.gov – responses are typically sent within 48 hours.

BEFORE YOU BEGIN Visit our licensing webpage at <https://www.maricopa.gov/226/Dog-License> for additional information you may want to review and to access our online portal. If you are starting on the home page (www.Pets.Maricopa.gov), select the “Dog Licenses” tab from the **Common Requests** heading to be directed to the “License Your Dog” webpage as shown below.

COMMON REQUESTS




Once you are on the “License Your Dog” webpage, select the button on the left labeled “License Your Dog Today Online” (shown below) to access our online portal.

LICENSING YOUR DOG



TO START Since this is your first time licensing your dog, you will not have an account number or reference/license number to enter. Instead, click on the “Start New Registration” button to begin.



Maricopa County
Animal Care and Control
2500 S 27th Avenue
Phoenix, AZ 85009
(602) 506-7387

Information Lookup▼

Enter your license or notice reference number.


Enter your Account Number, PersonID or Last Name.

Find Your Information

Start New Registration

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Once you select “Start New Registration,” you will be prompted to enter your physical address (your actual home address) and click “Submit Address” to move on to the next screen.



Maricopa County
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2500 S 27th Avenue
Phoenix, AZ 85009
(602) 506-7387

Please enter your PHYSICAL address

City

State

Zip Code

Submit Address

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Enter all your information under the **Contact Information** tab, including your email address, to continue your registration. Note: If you are 65 years or older, please click on the box stating “I am 65 or older and would like Senior Citizen pricing” and enter your date of birth on the next line.

Contact Information

First Name
New Dog

Last Name
Owner

Physical Address
2500 S 27th Ave

City
Phoenix

State
AZ-Arizona

ZIP Code
85009

Phone Number
(555) 123-4567 x _____

Secondary Phone Number (optional)
Please optionally enter your second phone number.

Email Address
youremail@here.com

Confirm Email Address
youremail@here.com

My physical and mailing address are **DIFFERENT**.

I am 65 or older and would like Senior Citizen pricing. (optional)

Enter your Date of Birth: (optional)

Next, you will need to enter your dog’s information (shown on the next page), including your pet’s sex by clicking on the down arrow in the Pet’s Sex field to indicate your dog is either: unaltered or “Female (spayed)” or “Male (neutered).” If your dog’s breed is not listed under the Primary Breed field, select the one that is most similar.

You can upload a copy of your dog’s rabies vaccine certificate (using a JPEG or PDF format) as proof of the current vaccination. If you do not have a copy available, you will need to enter the date of the most recent rabies vaccination, choose the correct 1 year or 3 years validation period, and select the veterinarian who administered the vaccine. However, if you do not have this information available at the time of registration, then enter today’s date, select any Vet Clinic, and check the certification box to move the process forward. You will then need to separately email (Licensing@Maricopa.gov) or fax (602-372-7556) a copy of the current rabies certificate to fully complete your dog license application.

Once all your information is entered click on “Add to Cart” to complete the registration or “License Another Pet” if you have another dog to register.

See the **red boxes** below for the locations of the Pet's Sex and Rabies vaccination areas.

Jack Remove Animal

Pet's name:
Jack

Type of pet you are licensing:
Dog

Pet's sex:
Male (neutered)

Pet's date of birth:
05/06/2015

or

Pet's age in years:
5

Months:
Ex. 1-11

Pet's primary breed:
Afghan Hound

Pet's primary color:
Black

Pet's microchip number: (optional)
Microchip number

Date of your pet's most recent rabies vaccination:
04/30/2020

How many years is your pet's rabies vaccine valid?

1 Year
 3 Years

Veterinarian/clinic that vaccinated your pet for rabies:
ACADEMY WEST ANIMAL HOSPITAL

Upload proof of rabies vaccination. Please Note: Your license will not be valid without proof of a current rabies vaccination certificate. If you cannot upload proof at this time, please email a copy to Licensing@mail.maricopa.gov

Browse...

I certify that my pet has a current rabies vaccination and will remain vaccinated during the license period. Making a false declaration regarding the vaccination of an animal may result in a citation and/or non-issuance of a license.

Veterinarian/clinic that spayed/neutered pet:
ADOBE VETERINARY CLINIC

Upload proof of spay/neuter:

Browse...

I certify that my pet has been spayed/neutered. Making a false declaration regarding the spay/neuter of an animal may result in increased licensing fees, a citation and/or non-issuance of the license.

Based on the above information you are eligible to purchase one of the following licenses:

Sterilized Dog License: \$19.00

+ License Another Pet Add to Cart

The **Checkout Information** section now appears with options to include a donation, add comments, and review the refund policy. After verifying everything is correct, check the “I’m not a robot” box and click the “Submit Registration” button.

Note: If you add a donation or enter comments, you must click on the “Update Cart” button (top right) before proceeding to “Submit Registration.”

[+ License Another Pet](#)[Update Cart](#)

Checkout Information ▼

Review the information below.

- If the information is correct, please select the "Checkout" button below.
- If the information is not correct, scroll up to edit the information and "UPDATE CART" to review edits.

Personal Information - - New Dog Owner ▼

Information for Jack — \$19.00 ▼

[← Remove Animal](#)

Current Charges	
Item Description	Item Price
License Fee - Jack	\$19.00
Total	\$19.00

Help support our organization by donating to one of the following funds:

Donation

[Make Donation](#)

Enter any additional comments that you may have below: (optional)

Additional Comments

Please Read our Refund Policy

Transactions are not refundable. If you have any problems with your transaction after completion, please contact us. By clicking the submit button below, you indicate that you have read and agree to these terms. Thank you!


Grand Total: \$19.00

I'm not a robot

reCAPTCHA
Privacy - Terms

[Submit Registration](#)

After you click on the "Submit Registration" button, you will be taken to the **Payment Entry** screen to enter in your payment (credit or debit card) information. After you review your information, click on the "Continue" button on the bottom of the page.








Maricopa County
Animal Care & Control

Pet Licensing Division

Payment Entry

Payment Method: Credit or Debit Card

Card Information		Billing Information	
Card Number	<input type="text"/>	Name	<input type="text" value="JOE DOG OWNER"/>
Expiration Date	Month <input type="text" value=""/> <input type="text" value=""/> Year <input type="text" value=""/> <input type="text" value=""/>	Address	<input type="text" value="2500 S 27TH AVE"/>
Card Identification Code	<input type="text"/> 	City	<input type="text" value="PHOENIX"/>
   		State	Arizona <input type="text" value=""/>
		Zip	<input type="text" value="85009"/>
		Phone	<input type="text" value="(602) 555-1212"/>
		Email	<input type="text" value="CallCenter@Maricopa.gc"/>

Click Continue to review your payment information


Next you will see the **Review Your Payment or Donation Details** screen. This is your last opportunity to make any changes to your application using the “Go Back/Edit” button. Once you have confirmed all information on this page, you must click on the “Process Payment” button (see the **red box** below) for your transaction to be completed. You will then receive an email from MCACC to verify your payment.

Maricopa County
Animal Care & Control

Pet Licensing Division

Please Review Your Payment or Donation Details

Unique ID : 4509911f0acb460dae63e967b02c1456
Description : Transaction for JOE DOG OWNER.
Invoice ID : MRCP/5031116
Payment Amount: \$19.00

Card Information		Billing Information	
Card Number	*8183	Name	JOE DOG OWNER
Expiration Date	6/23	Country	US
Payment Type		Address	2500 S 27TH AVE
		City	PHOENIX
		State	AZ
		Zip	85009
		Phone	(602) 555-1212
		Email	CallCenter@Maricopa.gov

Go Back/Edit Cancel **Process Payment**


Note: If for any reason we cannot process the license application as submitted, a notification email will be sent to you with the reason. One of the most common reasons this occurs is the current rabies vaccination certificate is missing from the application. However, this is an easy fix – you can send the valid certificate directly to us via email, fax, or mail.

Email: Licensing@Maricopa.gov

Fax: 602-372-7556

Mail: Maricopa County Animal Care and Control
PO Box 52014
Phoenix, AZ 85072

Sample receipt email to confirm your payment has been processed




Maricopa County
Animal Care & Control

Pet Licensing Division

Thank you for your payment or donation.

Please print this receipt and keep it for your records.

Unique ID :	1f40c31bb04c4e5393b2167244d367b6
Description :	Transaction for
Invoice ID :	MRCP/5030459
Payment Amount:	\$19.00
Receipt Number:	3780816146
Transaction Date:	04/30/2020 10:33 AM
Payment Type:	
Account Number:	*7834

Thank you for taking the time to license your dog with Maricopa County! Responsible dog owners like you help us ensure a safer and healthier community for all people and pets as well as provide life-saving funding for the daily care of the many homeless pets in our shelter.