



DEPARTMENT OF ANIMAL SERVICES

CITY OF LOS ANGELES

SERVICE DOG IDENTIFICATION TAG APPLICATION AND AFFIDAVIT



I, _____ am applying for a Service Dog Identification Tag pursuant to California Food and Agricultural Code Section 30850. I understand that there is no cost for the Service Dog Identification Tag. However, the dog must have a valid, current dog license at the time of issuance of the Service Dog Identification Tag.

By signing this form, I certify that I am the owner of this dog. **I further certify that** the dog is eligible for this tag because:

- 1) _____ I am a person with a disability, as defined under State or Federal law, and my dog is trained for a specific task to assist me; or
- 2) _____ I am a trainer of service animals for persons with disabilities as defined under State or Federal law.

SERVICE DOG INFORMATION

_____ Dog's Name

_____ Breed

_____ Microchip No.

_____ Age

Male ___ Female ___

_____ Dog License No.

Description of Dog: _____

Specific Service(s) Provided by Dog: _____

Address Where Dog Is Kept: _____

Dog Trained By: _____

NOTE: Emotional support or companion animals are not eligible for a Service Dog Identification tag.

By affixing my signature to this affidavit, I hereby declare I fully understand that Section 365.7 of the Penal Code prohibits any person who knowingly and fraudulently represents himself or herself, through verbal or written notice, to be the owner or trainer of any canine licensed as, to be qualified as, or identified as a guide, signal, or service dog, as defined in subdivisions (d), (e) and (f) of Section 365.5 paragraph (6) of subdivision (b) of Section 54.1 of the Civil Code, shall be guilty of a misdemeanor punishable by imprisonment in the county jail not exceeding six (6) months, by a fine not exceeding one thousand dollars (\$1,000), or by both that fine and imprisonment.

IN ADDITION, within thirty (30) days after the dog is transferred to another owner or trainer, I shall notify the Department of Animal Services in writing of the name, address and contact information of the new owner or trainer and return the service dog identification tag to the Department. Further, upon the death or retirement of the dog as a service dog, I shall immediately return the service dog identification tag to the Department of Animal Services.

By issuing this service dog identification tag, the Department of Animal Services is not confirming the truthfulness of the information in this Application, but is relying exclusively upon my statements, which I am making under penalty of perjury.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature

Date

Name (Print)

Address

E-mail address

Phone No. (Daytime)

Phone No. (Evening)

For Department Use Only

Issued By: _____

Date: _____

Title: _____

Tag No.: _____

COMMENTS: _____