



**COUNTY OF SAN DIEGO
APPLICATION FOR ASSISTANCE DOG
IDENTIFICATION TAG**



OWNER, AUTHORIZED USER, OR TRAINER INFORMATION

_____	() _____	() _____
Name (Please Print)	Phone # (Daytime)	Phone # (Evening)
_____	() _____	() _____
Street Address	Fax #	TDD #
_____	_____	
City, State	Zip Code	

ASSISTANCE DOG INFORMATION

_____	_____	_____
Dog's Name	Breed	Color
Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed <input type="checkbox"/> Neutered <input type="checkbox"/>	_____	_____
	Age	COSD Dog License #
		Microchip #

I certify that this dog is a guide dog signal dog* service dog* as defined by state law, or is in training to be qualified as such.

“Guide dog” means any guide dog or Seeing Eye dog that was trained by a person licensed under Chapter 9.5 (commencing with Section 7200) of Division 3 of the Business and Professions Code or that meets the definitional criteria under federal regulations adopted to implement Title III of the Americans with Disabilities Act of 1990 (Public Law 101-336).

“Signal dog” means any dog trained to alert a deaf person, or a person whose hearing is impaired, to intruders or sounds.

“Service dog” means any dog individually trained to do work or perform tasks for the benefit of an individual with a disability, including, but not limited to, minimal protection work, rescue work, pulling a wheelchair, or fetching dropped items.

* If a signal dog or service dog, you are required to complete the back of this application.

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

I declare under penalty of perjury, under laws of the State of California, that the information provided on this application is true and correct.

_____	_____
Signature	Date

Signal Dog / Service Dog

This dog is specifically trained by:

Name of trainer

Phone number of trainer

Address of trainer

My dog is specifically trained to perform the following function or functions to assist me (please list **ALL** functions the dog is trained to perform):

OR,

This dog is in training to perform a function or functions to assist me, or another person with a disability as defined by law. I certify that training has progressed beyond basic obedience to the following specific functions/tasks (please list **ALL** functions the dog is being trained to perform):

DO NOT include any medical information

_____ I understand that the Department of Animal Services will notify DMV of all seizure alert dog applications which could impact my driver's license status.
Initial here

_____ I understand that the Department of Animal Services will notify the Department of Justice of all psychiatric service dog applications which could impact my right to possess firearms.
Initial here

I certify under penalty of perjury that the information on this form is true and correct. I understand that the Department of Animal Services should make a determination of my dog's eligibility for an Assistance Dog tag within thirty (30) days.

Signature of owner

Date