



CITY OF HERMOSA BEACH
Revenue Services Division
1315 Valley Dr, Rm 101
Hermosa Beach, CA 90254
Tel 310-318-0251 or 310-318-0217
LKotero@hermosabeach.gov
www.hermosabeach.gov

OFFICE HOURS
Mon - Thu: 7:00am - 6:00pm

2026 DOG LICENSE APPLICATION AND RENEWAL FORM

DUE DATE
October 31, 2026

LICENSING FEES

Altered (spayed or neutered)	\$27.00
Non-altered	\$112.00
Altered, Senior Residents (age 60)	\$13.00
Non-altered, Senior Residents (age 60) ..	\$56.00
Penalty after DUE DATE	+ 50%

It is time to register or renew a license for your dog.

If you no longer own your dog, please notify the Revenue Services Division.

All dogs four months or older, located within the City of Hermosa Beach must be licensed. Licenses are valid October 1st thru September 30th of each year. To avoid penalties, payments must be received by October 31, 2026. Please check the expiration date(s) of the rabies vaccination(s) on file as shown below and provide an updated certificate if it expires prior to 9/30/2026. Licenses will only be issued for dogs with rabies vaccinations valid through the entire license period. If your dog is unable to re-vaccinate prior to the end of the license period, please contact the Revenue Services Division. If your dog does not show that it has been spayed/neutered below, please provide the certificate for the discounted rate. If you are a senior and your birthdate is not shown below, please provide a copy of your photo ID. If you are applying for the first time, please be sure to include all applicable documentation i.e., the rabies certificate, the spay/neuter certificate or your photo ID for senior rate.

ON-LINE

Dog licenses may be purchased or renewed online at <https://www.doglicenses.us/CA/HermosaBeach> using the Renewal ID and Online Code below. Payments must be made with a credit card and a per license convenience fee will apply. Documents may be attached to orders during check-out, mailed or emailed to LKotero@hermosabeach.gov.

Renewal ID:

Online Code:

BY MAIL or DROP OFF

Please review the table and owner information below and make any necessary changes. Enclose the bottom portion of this notice in an envelope, including a check payable to **City of Hermosa Beach** and mail to Revenue Services Division or drop off in the drop box at the front of City Hall.

IN PERSON

Please bring this notice as well as any required documentation to the Revenue Services Division in room 101. Payment may be made by cash, check or credit card (There is processing fee for all credit/debit transactions).

Hermosa Beach Annual Rabies Clinic has not been confirmed. Please go to www.HermosaBeach.gov for updates.

Age		Sex (M/F)	Spay / Neut	Color								Breed	Dog Name	Microchip #	Rabies Expire (m/d/y)	Fee
YRs	MOs			BL	WH	GR	BD	TA	BR	YE	RE					
Color Codes: BL=Black; WH=White; GR=Gray; BD=Brindle; TA=Tan; BR=Brown; YE=Yellow; RE=Red															Total	

Owner Information

Name: _____

Street Address: _____

Mailing Address: _____
if different (e.g. PO Box)

City: _____ State: _____ ZipCode: _____

Phone 1 _____ Phone 2 _____

Email _____

For Senior Citizen discount, date of birth ____ / ____ / ____
(include copy of photo ID for senior discount)

Include my last name and phone number
in the public license search system. ____ Yes ☒ No