



Request for Duplicate Certificate of Ownership
Email or Fax \$20.00

Date: _____

Owners Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Dog Information:

Registered Dog Name: _____

Sex: _____ Male _____ Female DOB: _____

Breed: _____

Reason:

Please note: A request for duplicate registration will require photo identification from the recorded owner on file to be approved. This can be emailed to: ICBRreg@gmail.com. (Please cover identification number & DOB for privacy)

Signature of Owner: _____ Date: _____

Innovative Canine Breeder's Registry, LLC.
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(864) 677-3270 Fax
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