DOG IDENTIFICATION

License No.		Microchip No.
Date Issued	Expiration Date	
Dog Breed		Code
Dog Color(s)		Code(s)
Other ID	Dog's Yr. of Birth Last 2 Digits	
Markings		Dog's Name

DOG LICENSE

LICENSE TYPE

☐ ORIGINAL ☐ RENEWAL

☐ TRANSFER OF OWNERSHIP

RABIES CERTIFICATE REQUIRED
Rabies Vaccine:

Manufacturer _____

Serial Number _____

One Year Vacc. Three Year Vacc.

Date Vaccinated _____

Veterinarian _____

Owner Identification (Person who harbors or keeps dog): Last First Middle Initial

OWNER'S PHONE NO. Area Code

Mailing Address: House No. Street or R.D. No. and P.O. Box No. Phone No.

City **State** **Zip**

County **Town, City or Village**

TYPE OF LICENSE	Fee	Spay/Neuter Fee
1. ☐ Male, neutered	____	1.00
2. ☐ Female, spayed	____	1.00
3. Male, unneutered		
☐ under 4 months	____	
☐ 4 mos. & over	____	3.00
4. Female, unspayed		
☐ under 4 months	____	
☐ 4 mos. & over	____	3.00
5. ☐ Exempt dogs		

LICENSE FEE_____

SPAY/NEUTER FEE_____

ENUMERATION FEE_____

TOTAL FEE_____

IS OWNER LESS THAN 18 YEARS OF AGE? YES NO IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED BY THEM

Owner's Signature Date Clerk's Signature Date