DOG IDENTIFICATION

License No.	Microchip No.
Date Issued	Expiration Date
Dog Breed	Code
Dog Color	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'S PHONE NO.

Owner Identification (Person who harbors or keeps dog): Last First Middle Initial — 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	____	
2. ☐ Female, spayed	____	
3. Male, unneutered		
☐ under 4 months	____	
☐ 4 mos. & over	____	
4. Female, unspayed		
☐ under 4 months	____	
☐ 4 mos. & over	____	
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