

**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																
<b>TYPE OF LICENSE</b>		Fee		Spay/Neuter Fee		<table border="1"> <tr><td>LICENSE FEE</td><td>_____</td></tr> <tr><td>SPAY/NEUTER FEE</td><td>_____</td></tr> <tr><td>ENUMERATION FEE</td><td>_____</td></tr> <tr><td>TOTAL FEE</td><td>_____</td></tr> </table>								LICENSE FEE	_____	SPAY/NEUTER FEE	_____	ENUMERATION FEE	_____	TOTAL FEE	_____
LICENSE FEE	_____																				
SPAY/NEUTER FEE	_____																				
ENUMERATION FEE	_____																				
TOTAL FEE	_____																				
1. <input type="checkbox"/> Male, neutered		9.00		+ 1.00																	
2. <input type="checkbox"/> Female, spayed		9.00		+ 1.00																	
3. Male, unneutered																					
<input type="checkbox"/> 4 mos. & over		17.00		+ 3.00																	
4. Female, unspayed																					
<input type="checkbox"/> 4 mos. & over		17.00		+ 3.00																	
5. <input type="checkbox"/> Exempt dogs																					
<p>IS OWNER LESS THAN 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED BY THEM.</p>																					
Owner's Signature					Date					Clerk's Signature					Date						