

DOG & CAT ANNUAL LICENSE APPLICATION



Owner Name(s): _____ Date: _____

Phone: _____ Email: _____

Alternate Contact, in case of emergency: _____

Address: _____ Mailing Address: _____

Please submit a copy of a CURRENT RABIES certificate and a photo of your pet.

License: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Dog <input type="checkbox"/> Cat Pet #1 Name: _____ Breed: _____ Color/Markings: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Neutered/Spayed: <input type="checkbox"/> YES <input type="checkbox"/> NO Vaccination Expires: ____/____/____ (Town Use Only): Mead Tag # _____	License: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Dog <input type="checkbox"/> Cat Pet #2 Name: _____ Breed: _____ Color/Markings: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Neutered/Spayed: <input type="checkbox"/> YES <input type="checkbox"/> NO Vaccination Expires: ____/____/____ (Town Use Only): Mead Tag # _____
License: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Dog <input type="checkbox"/> Cat Pet #3 Name: _____ Breed: _____ Color/Markings: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Neutered/Spayed: <input type="checkbox"/> YES <input type="checkbox"/> NO Vaccination Expires: ____/____/____ (Town Use Only): Mead Tag # _____	License: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Dog <input type="checkbox"/> Cat Pet #4 Name: _____ Breed: _____ Color/Markings: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Neutered/Spayed: <input type="checkbox"/> YES <input type="checkbox"/> NO Vaccination Expires: ____/____/____ (Town Use Only): Mead Tag # _____

Spayed/ Neutered: \$5.00

Unaltered: \$10.00

New Pet License: After July 1st half-price of annual fee.

Renewal Pet License: \$1.00 Late fee will be added each month after Dec. 31st.