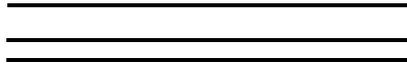


DOG IDENTIFICATION

License No.		Microchip No.	
Date Issued	Expiration Date		
Dog Breed			
Dog Color(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.																				
<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																														Area Code					
Mailing Address: House No. Street or R.D. No. and P.O. Box No.															Phone No.																				
<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																														<table border="1"> <tr><td></td><td></td><td></td></tr> </table>					
City										State		Zip																							
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County					Town, City or Village																														
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TYPE OF LICENSE		Fee	Spay/Neuter Fee																																
1. Male, neutered		\$19.00	1.00																																
2. Female, spayed		\$19.00	1.00																																
3. Senior Discount (over 65) (spayed/neutered)		\$ 9.00	1.00																																
4. Male, unneutered		\$27.00	3.00																																
5. Female, unspayed		\$27.00	3.00																																
6. Senior Discount (unneutered/unspayed)		\$17.00	3.00																																
7. Exempt dogs		No Fee																																	
8. Replacement tag		\$ 3.00																																	
				<table border="1"> <tr> <td>LICENSE FEE _____</td> </tr> <tr> <td>SPAY/NEUTER FEE _____</td> </tr> <tr> <td>TOTAL FEE _____</td> </tr> </table>											LICENSE FEE _____	SPAY/NEUTER FEE _____	TOTAL FEE _____																		
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Owner's Signature _____					Date _____					Clerk's Signature _____					Date _____																				