

TOWN OF TYRE DOG LICENSE APPLICATION

PLEASE PRINT

Name: Date:

LAST FIRST MI MO DAY YEAR

Address 1:

Address 2:

Home Phone: () Cell Phone: ()

Email Address:

Dog Name: Year of Birth:

Dog Breed: Dog Color(s):

Tattoo/Microchip: Markings:

RABIES IMMUNIZATION

Please attach a Rabies Immunization Certificate from the Veterinarian.

<u>TYPE OF LICENSE</u>	<u>LOCAL FEE</u>	<u>SURCHARGE</u>	<u>TOTAL</u>
<u>CHECK ONE</u>			
<input type="checkbox"/> Male, Neutered	\$ 7.50	\$1.00	\$ 8.50
<input type="checkbox"/> Female, Spayed	\$ 7.50	\$1.00	\$ 8.50
For spayed or neutered dogs, please attach certificate of verification from Veterinarian			
<input type="checkbox"/> Male, Unneutered	\$13.50	\$3.00	\$16.50
<input type="checkbox"/> Female, Unspayed	\$13.50	\$3.00	\$16.50

OWNER'S SIGNATURE: DATE:

FOR OFFICE USE ONLY

DATE PROCESSED: _____ **INITIALS:** _____