

(For Office Use Only)

License No. _____

Issue Date. _____ Expiration _____

Fee: _____

DOG LICENSE APPLICATION

TOWN OF DRYDEN
 93 EAST MAIN ST
 DRYDEN, NY 13053
 607-844-8888 x3

LICENSE TYPE

Original Renewal
 Transfer of Ownership

RABIES CERTIFICATE REQUIRED
 (For Office Use Only)

Manufacturer: _____

Serial No.: _____

One Year Vacc. Three Year Vacc.

Date Vaccinated: _____

Veterinarian: _____

Annual Fees:

Spayed or Neutered - \$11.00 per year (\$1 State spay/neuter surcharge, \$10 local fee)
 Unspayed/unneutered - \$23.00 per year (\$3 State spay/neuter surcharge, \$20 local fee)

Exempt - no local fee, must pay state surcharge - Guide dog, war dog, police dog, hearing dog, service dog (Proof Required)

Is owner under 18? If yes, parent or guardian shall be deemed the owner of record and the information must be completed by them.

Dog Owner: Complete the owner and dog identification portions below. Mail or bring to the Town Clerk's Office with **proof of rabies vaccination, proof of spay/neuter if applicable**, and a check payable to the Dryden Town Clerk for the appropriate amount. A validated copy of the application and license identification tag will be provided to you.

Owner Identification: (Person who owns or harbors the dog)

Last, first, middle _____

Telephone # _____

Street Address, City, State, Zip

Mailing Address (if different), City, State, Zip

Dog Identification:

Spayed or Neutered? (Circle one) Yes No Sex (M/F) _____ Microchip # & _____

Dog Name _____ Microchip Manufacturer _____

Breed _____ Color _____ Year of Birth _____

 Signature of Owner Date

 Signature of Clerk Date

If you have any questions, please call our office at 844-8888, option 3, Monday through Friday, 8:00 a.m. to 4:30 p.m.