DOG IDENTIFICATION

| License No. | | Microchip No. | |
|-----------------|--------------------------------|---------------|--|
| Date Issued Exp | | iration Date | |
| Dog Breed | l . | | |
| Dog Color(s) | | | |
| Other ID | | | |
| | Dog's Yr. of Birth 4 Digits | | |
| Markings | Di tii 4 Digits | Dog's Name | |

TOWN OF SANTA CLARA DOG LICENSE

LICENSE TYPE

ORIGINAL

TRANSFER OF OWNERSHIP

| RABIES CERTIFICATE REQUIRED | | | | | |
|--|--------------------|--|--|--|--|
| Rabies Vaccine: Manufacturer Serial Number | | | | | |
| ☐ One Year Vacc. Date Vaccinated | ☐ Three Year Vacc. | | | | |
| Veterinarian | | | | | |

OWNER'S INSTRUCTIONS

- 1. All dogs 4 months of age or older are to be licensed. In addition, any dog under 4 months of age, if running at large must be licensed.
- 2. Print all information in the appropriate boxes and sign the form.
- 3. Check the type of license you are applying for.
- 4. For validation of this license submit in person or by mail, this application, fee, certification of spaying or neutering, proof of exemption if a service dog, and proof of current rabies vaccination to the Town of Santa Clara Clerk at 5359 State Route 30, Saranac Lake, NY 12983.

| (Dansan yaha hanbans an l | lang dog). Last E | irat Middle Initial | | Owner Identification Area Code | | | | |
|--|----------------------|-------------------------|----------------------|---------------------------------------|--|--|--|--|
| (Person who harbors or l | keeps dog): Last F | irst Wilddle Illitiai | | Alea Code | | | | |
| | | | | | | | | |
| Mailing Address: House | No. Street or R.D. N | lo. and P.O. Box No | 0. | Phone No. | | | | |
| | | | | | | | | |
| City | City State Zip | | | | | | | |
| | | | | | | | | |
| County | | т | own, City or Village | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | |
| | | | own, city of vinage | | | | | |
| | | | | | | | | |
| TYPE OF LICENSE 1.Male, neutered | Check one Sp | oay/Neuter Fee 10.00 | | | | | | |
| 2. Female, spayed | | 10.00 | | | | | | |
| 3. Male, unneutered under 4 months 4 mos. & over | = | 20.00 | | | | | | |
| 4. Female, unspayed under 4 months 4 mos. & over | | 20.00 | | | | | | |
| 5.Exempt dogs | _ | | | | | | | |
| | | | | | | | | |
| IS OWNER LESS THAN 18 YEARS OF AGE? YES NO IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED BY THEM. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Owner's Signature | Date | Clerk's Signature Date | | | | |