

TOWN OF BOLTON – APPLICATION FOR DOG LICENSE

LAST YEAR'S TAG: _____

NEW TAG NUMBER: _____

OWNER'S OR KEEPER'S INFORMATION:

NAME: _____ PHONE NUMBER: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

DOG'S INFORMATION:

DOG'S NAME: _____

COLOR: _____ BREED: _____

AGE		SIZE			SEX			COLOR	PROMINENT BREED
YEARS	MONTHS	SMALL	MEDIUM	LARGE	MALE	FEMALE	NEUTERED		

THIS ANIMAL IS THE ANIMAL DESCRIBED IN RABIES VACCINATION CERTIFICATE NUMBER _____. ***A COPY OF THE CURENT RABIES CERTIFICATE MUST BE KEPT ON FILE AT THE BOLTON TOWN OFFICE.***

THIS RABIES VACCINATION EXPIRES ON _____.

SIGNATURE OF OWNER

DATE

FEE: \$12 PAID: _____

YOUR DOG'S TAG AND A COPY OF THE LICENSE WILL BE MAILED TO THE ADDRESS ABOVE.

NOTE: ALL DOGS MUST WEAR A COLLAR WITH TAGS ATTACHED.