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

Town of Olive
DOG LICENSE

Town Clerk's Office
PO Box 96
West Shokan, NY 12494

RABIES CERTIFICATE REQUIRED
Rabies Vaccine:

Manufacturer _____

Serial Number _____

One Year Vacc. **Three Year Vacc.**

Date Vaccinated _____

Veterinarian _____

OWNER'S PHONE NO.

Owner Identification (Person who harbors or keeps dog): Last First Middle Initial — Area Code

Mailing Address: House No. Street or R.D. No. and P.O. Box No. — Phone No.

City — **State** — **Zip**

County — **Town, City or Village**

U L S T E R — O L I V E

TYPE OF LICENSE	Fee		Spay/Neuter Fee
1. Male, neutered	5.00	+	1.00 = $6.00
2. Female, spayed	5.00	+	1.00 = $6.00
3. Male, unneutered			
under 4 months	10.00	+	3.00 = $13.00
4 mos. & over	10.00	+	3.00 = $13.00
4. Female, unspayed			
under 4 months	10.00	+	3.00 = $13.00
4 mos. & over	10.00	+	3.00 = $13.00
5. Exempt dogs			

LICENSE FEE_____

SPAY/NEUTER FEE_____

ENUMERATION FEE_____

TOTAL FEE_____

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