

DOG LICENSE APPLICATION

USE SEPARATE FORM FOR EACH DOG (may be duplicated or Town Office has forms)
CURRENT RABIES VACCINATION CERTIFICATE IS REQUIRED. LICENSE **CANNOT**
BE ISSUED WITHOUT DATE OF LAST VACCINATION, MANUFACTURER AND
SERIAL NUMBER OF VACCINE – NOT TAG #.

***** IF MAILING APPLICATION, PLEASE INCLUDE PROPER FEE, COPY OF RABIES
CERTIFICATION AND SELF ADDRESSED STAMPED ENVELOPE TO:

TOWN OF SPRINGFIELD, 6157 CTH P, DANE WI 53529

OWNERS NAME _____
ADDRESS _____ Phone # _____
NAME OF DOG _____
COLOR _____ BREED _____ AGE _____
DATE RABIES SHOT GIVEN _____
DATE RABIES SHOT IS DUE _____
MANUFACTURER NAME _____ SERIAL # _____
SEX: M _____ F _____ SPAYED/NEUTERED: YES (\$25) _____ NO (\$34) _____
KENNEL (\$92) _____ (12 DOGS OR LESS-INDICATE M OR F, & SPAY/NEUTER STATUS)
VETERINARIAN/CLINIC _____ PHONE # _____

(SUBJECT OF THE PROVISIONS OF CH. 174 OF THE STATUTES, AND SUCH PROVISIONS AND
REGULATIONS AS MAY AT ANYTIME BE IMPOSED BY THE STATE OF WISCONSIN)