

TOWN OF HORNELLSVILLE

DOG LICENSE APPLICATION

DOG IDENTIFICATION

Dog Breed:		Breed Code:	
Dog Color(s): (Maximum of two)			
Color Code #1:		Color Code #2:	
Markings:		Microchip/Tattoo#:	
Dog's Name:			Birth Year:

*If you do not see your code please leave it blank

APPLICATION FOR LICENSE TYPE

New
 Renewal

Type of License:	Local Fee	State Surcharge	Total Fee
Male - Neutered	\$9.00	\$1.00	\$10.00
Female - Spayed	\$9.00	\$1.00	\$10.00
Male - Unneutered	\$14.00	\$3.00	\$17.00
Female - Unspayed	\$14.00	\$3.00	\$17.00

For new licenses please attach a copy of your dog's current rabies vaccination and spay/neuter if applicable.

LAST NAME, FIRST NAME of Owner or Person who harbors or keeps this dog

PHYSICAL ADDRESS: **CITY** **STATE** **ZIP CODE**

MAILING ADDRESS (if different): **CITY** **STATE** **ZIP CODE**

COUNTY **PRIMARY PHONE** **ALTERNATE PHONE** **EMAIL**

Make checks payable to:
Hornellsville Town Clerk

Mail required documents and payment to:
Hornellsville Town Clerk
PO Box 1
Arkport, NY 14807-0001

Is Owner less than 18 years of age? YES NO

If YES, parent or legal guardian of said "Owner" shall be deemed the "Owner of Record" and this application must be completed by them.

Owner's Signature

Date