

## Town Of Amenia

4988 Route 22, Amenia, NY 12501 voice: 845-373-8860 fax: 845-373-8140

townclerk@ameniany.gov

DOG LICENSE TYPE:		Orig	ginal		Renewal		_ Transf	er of Owners	ship
DOG IDENTIFICATION					RABIES CERTIFICATE REQUIRED				
License No.	Microchip ID No.				Rabies Vaccine				
Date Issued	Expiration Date				Manufacturer				
Dog Breed					Serial Number				
Dog Color(s)					1 Year Vaccine 3 Year Vaccine				
Markings/Other ID					Date Vaccinated				
Date of Birth	h Dog's Name				Veterinarian				
OWNER IDENTIFICATION (	Person who	Harbors or K	eens Dog						
OWNER IDENTIFICATION (Person who Harbors or Keeps Dog)									
Last Name				First				Middle Initia	ı
Home Phone				Cell					
Email									
Physical Address									
City				State			Zip		
Mailing Address									
City				State			Zip		
Town or Village				•					
Type of License		Fee	NVS /	APCP Fee*	Please ma	ko cha	ocks navah	le to:	
Male, Neutered (Over 4 Months)		\$11.50	\$1.00		Town of	Amer	nia Town C	lerk	-
Female Spayed		\$11.50	\$1.00			Licer	ise Fee:	\$	
Male, Unneutered (Over 4 Months)		\$17.50	\$3.00			*NYS	APCP Fee:	\$	
Female, Unspayed (Over 4 Months)		\$17.50	\$3.00			Tota	l Fee:	\$	
Exempt Dog (Training Certificate Required)					* New York State Animal Population Control Program			I	
						<u> </u>			
Owner's Signature			Date		Clerk's	Signat	ure	Da	ate

IF NEUTERED OR SPAYED, PLEASE INCLUDE A COPY

OF THE NEUTER/SPAY CERTIFICATE

K:\Misc Folders\Dogs\Dog License Application.Docx

PLEASE INCLUDE A COPY OF THE RABIES CERTIFICATE