## VILLAGE OF ELLSWORTH

130 N CHESTNUT STREET, ELLSWORTH, WI 54011 | PHONE 715-273-4742 | FAX 715-273-6460

## **DOG LICENSE APPLICATION 2023**

License is valid for the calendar year (Jan. 1 – Dec. 31) **Due by April 1**st, 2023

Please complete/sign this form and return it with applicable fees and Rabies Certificate to the Village Clerk's office by mail, in person, or in our 24-hour drop box. License fees can be paid by cash or check.

Make checks payable to the Village of Ellsworth.

Owner's Name:					
Address:			_ City/Zip: Ellsworth, WI 54011		
Email:		Phone:			
DOG INFORMATION MUS	T INCLUDE	COPY OF CER	TIFICATE OF RABIES VACCINATION		
Name of Dog #1		Color	Breed		
Date of Rabies Shot	Rabies E	xp. Date	Vet Clinic Name		
Name of Dog #2		Color	Breed		
Date of Rabies Shot	Rabies E	xp. Date	Vet Clinic Name		
Name of Dog #3		Color	Breed		
Date of Rabies Shot	Rabies E	xp. Date	Vet Clinic Name		
License Fees per dog Neutered Male or Spayed Female: \$10.00 Female or Male: \$12.00 For renewals, penalty after April 1st: \$5.00		I, the undersigned do hereby certify that the above- named dog(s) has had the current rabies vaccination and/or has been neutered or spayed as stated above. Owner's Signature			
					Date
				Are there any dog(s) you hav	e licensed w
		Yes / No (Circle One) If yes	s, please pro	vide the dog(s)	name(s)
	OFI	FICE USE ON	LY:		
Date Tag Issued:	Tag #:		Paid (Cash, Check):		