**TOWN OF MAMARONECK DOG LICENSE APPLICATION**

**PURSUANT TO NEW YORK STATE DEPARTMENT OF AGRICULTURE AND MARKETS LAW ARTICLE 7**

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|  |  | New License |  |  | **Renewal Indicate License #:** | | | |  |  | Cancellation- Indicate Reason: | | | |
|  |  |  |
| Last name: | | | | | | | First: | | | | | | Middle: | |
| Street Address: | | | | | | | | | Phone #: | | | | | |
| City: | | | | | | | | | State: | | | Zip Code: | | |
| Name of Dog: | | | | | | | | Year of Birth: | | | | | | Sex: M F |
| Breed: | | | | | | | | Color(s): | | | | | | |
| Markings: | | | | | | | | Tattoo or chip: | | | | | | |
| Veterinary Hospital: | | | | | | | | | | | | | | |
| **Required: Please attached a Copy of the Rabies Certificate**  **and proof of spay or neuter** | | | | | | | | | | | | | | |
| **Check appropriate box**  **Fee**   * Male, Neutered. . . . . $ 21.00  Female, Spayed . . . . . $ 21.00   Male – Unneutered:   * under 4 months . . . . . $28.00  4 months & over . . . . .$28.00   Female – Unspayed:   * under 4 months . . . . . $28.00 * 4 months & over . . . . .$28.00   Exemption – **No Fee** (Guide, War,  Police, Hearing, Service Dogs) | | | | | | **Instructions**  Include:   1. This completed form 2. Rabies Certificate from veterinarian 3. Appropriate fee (listed at left)   (make check payable: Town of Mamaroneck)    Mail or Bring in person to:    Christina Battalia, Town Clerk  Town of Mamaroneck  740 W. Boston Post Road  Mamaroneck, NY 10543    (Note: if by mail: include self-addressed, stamped envelope. When completed, your license and rabies certificate will be mailed to you)    Questions or additional information, Call **914-381-7870** | | | | | | | | |
| Owner’s Signature: | | | | | | | | | | Date: | | | | |