Dear Dog Owner:

Below is your first Piercefield Dog License Form. You must bring this Form to the Town Clerk's Office with payment and a valid Rabies Vaccination or Exemption Certificate to obtain your Piercefield Dog License Collar Tag. Office hours are Tuesdays, 7-9pm, and Wednesdays and Fridays, 9am-3pm. In future years, you may renew by mail with payment and Rabies Certificate. Please review all data below and fill empty spaces as applicable.

Town of Piercefield Dog License

Issue Date: /	/ 20 Expira	ation Date: 08 / 31 / 20	Tag #: 4025
Owner Information		Dog Information	<u>License Type</u>
Owner Name: Address: Address: City: State/Zip: Telephone:		Dog Name: Year of Birth: Breed: MaleFen Spayed/NeuteredYesNo Primary Color: Secondary Color: Tattoo/Microchip #:	_x_OriginalRenewal < or > nale Dog is:DeceasedLostTransferred to new owner
Rabies Information		Fees: Terms net 30 days:	
Veterinarian: Manufacturer: Serial #: Vaccination Date: Expiration Date: Exempt Reason:	1yr / 3yr Too Young Too Old Illness	Town of Piercefield Spayed/Neutered Dog NYS Spayed/Neutered Dog Town of Piercefield Unspayed/Unneutered Dog NYS Unspayed/Unneutered Dog SLC Spayed/Neutered Dog SLC Unspayed/Unneutered Dog Town of Piercefield Dog Collar Tag Replacement Dog Collar Tag Enumeration (Dog Census) Fee TOTAL TO P	x_\$1.00x_\$9.50x_\$3.00\$\$x\$1.00\$2.00\$5.00
Owner Signature		Date	Payment Information
Clerk Signature		Date	Cash Check #: