## **TOWN OF LYNDON**

## **NEW DOG LICENSE APPLICATION**

Please complete the entire application and return it to the Town Clerk with a copy of the dog's rabies vaccination and a spay or neuter certificate if necessary.

OWNERS NAME:		_		
(Last)	(First)			
Address:		_		
Phone:		_		
(Home)	(Cell)			
Email:		_		
Breed:		_		
Color(s):		_		
Tattoo/Microchip #:				
Markings:		_		
Dog's Name:		_		
Dog's Year of Birth:		-		
Vet or Clinic:		_		
Rabies Vaccination: Copy of Rabies	s Vaccination Must be provided with this Appli	cation.		
License Type: Please check one fro	om below and FS & MN must have spay or neut	er Certificate		
[ ] Female, Un-Spayed FU	[ ] Female, Spayed FS	[ ] Female, Spayed FS		
[ ] Male, Un-Neutered MU	[ ] Male, Neutered MN	[ ] Male, Neutered MN		
License Type	Local Foo State Foo Total F			

License Type	Local Fee	State Fee	Total Fee
Spayed/Neutered	\$5.00	\$1.00	\$6.00
Un-Spayed/Un-Neutered	\$10.00	\$3.00	\$13.00
Thank A Vet Spayed/ Neutered	\$3.00	\$1.00	\$4.00
Thank A Vet Un-Spayed/Un-Neutered	\$8.00	\$3.00	\$11.00
Special Service	\$0	\$0	\$0