ONEONTA IST. 1830	TOWN OF C TOWN CLERK 3966 NY 23, West On Phone: (607) 432-2900 I clerk@townofo	('S OFFICE eonta, NY 13861 Fax: (607) 386-4816	
	DOG LICENSE AP	PLICATION	I M
NAME OF OWNER:			
MAILING ADDRESS:			5510
HOME PHONE:	HOME PHONE: CELL PHONE:		
e-MAIL:			
owner's signature	DOG IDENTIFI	date ICATON	
DOG'S NAME:			
BREED:	YEAR OF BIRTH:	GENDER:	
COLOR (primary):		_(secondary):	
MARKINGS:		_ MICROCHIP ID#:	
	<u>BE SURE TO IN</u>	ICLUDE	
 Rabies V Rabies V Rabies To Date of V 	OWING INFORMATION: accine Manufacturer accine Serial/Serum Number ag Number /accination hree Year Vaccination		
*Multiple-year licen	TYPE OF LICENSE (ple ses are available only if rabies ve	ase check one) accination is valid for the full term of the license	Э.
Licensing Fee Information			
1-year license for spayed/ne \$11.00 + \$1.00 NY State Surc \$12.00 TOTAL LICENSE FEE	5	 1-year license for intact dog \$17.00 + \$3.00 NY State Surcharge \$20.00 TOTAL LICENSE FEE 	
*2-year license for spayed/r \$20.00 + \$2.00 NY State Surc \$22.00 TOTAL LICENSE FEE	3	 *2-year license for intact dog \$34.00 + \$6.00 NY State Surcharge \$40.00 TOTAL LICENSE FEE 	
*3-year license for spayed/r \$29.00 + \$3.00 NY State Surc \$32.00 TOTAL LICENSE FEE		*3-year license for spayed/neutered of \$51.00 + \$9.00 NY State Surcharge \$61.00 TOTAL LICENSE FEE	god
	APPLICATION INS	STRUCTIONS	
Complete all information on the	application and sign before	returning to our office.	
For validation of this license, subr a. Dog License Application			

- b. Certification of spaying or neutering, or proof of exemption.
- c. Copy of Rabies Vaccination Information
- d. License Fee: Please make checks payable to *Town of Oneonta*.

3) Multiple-year licenses are available only if RABIES VACCINATION IS VALID FOR THE FULL TERM OF THE LICENSE.

4) Dog license fees are non-refundable.

1)

2)