



TOWN OF NEWBOLD DOG LICENSE APPLICATION

License # _____
(Treasurer Use Only)

Owner's Name _____ Phone # _____

Owners Address _____

Name of Dog _____ Breed of Dog _____

Color of Dog _____ Chip # _____

Please Circle Fee: \$15 Male \$5 Neutered Male \$15 Female \$5 Spayed Female

Penalty: A Late fee of \$10.00 shall be assessed the owner of each dog 5 months of age or older, who fails to obtain a license by April 1st of each year (Subject to the provisions of Ch. 174 Wisconsin State Statutes)

LICENSE WILL NOT BE ISSUED WITHOUT CURRENT PROOF OF RABIES VACCINATION
PLEASE OBTAIN PROOF FROM YOUR VETERINARIAN OFFICE

THE DOG LISTED ON THIS APPLICATION WAS VACCINATED AGAINST RABIES BY:

VETERINARIAN _____ CITY _____

VACCINE MANUFACTURER _____ VACCINE SERIAL NUMBER _____

DATE VACCINE GIVEN _____ DATE VACCINE EXPIRES _____

OWNER'S SIGNATURE _____

IF MAILING APPLICATION: RETURN COMPLETED FORM, PAYMENT, PROOF OF UPDATED RABIES VACCINATION, AND SELF-ADDRESSED, STAMPED ENVELOPE TO:

TOWN OF NEWBOLD
PO BOX 1063
RHINELANDER, WI 54501