

**Town of Lowville**  
**DOG LICENSE**

License No. \_\_\_\_\_  
Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Dog Breed \_\_\_\_\_ Code   
Dog Color(s) \_\_\_\_\_ Code  2308  
Other ID \_\_\_\_\_ Dog's Year of Birth \_\_\_\_\_  
Markings \_\_\_\_\_ Dog's Name \_\_\_\_\_ Original License \_\_\_\_\_

**Rabies Certificate Required**

Rabies Vaccine:

Manufacturer: \_\_\_\_\_  
Serial Number: \_\_\_\_\_  
Tag No: \_\_\_\_\_  
Date Vaccinated: \_\_\_\_\_  
One Year ☐ Three Year ☐

Owner Identification (Person who harbors or keeps dog): Last, First, Middle Initial: \_\_\_\_\_

\_\_\_\_\_  
Mailing Address: House No. Street and P.O. Box No.

Phone Number: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

TYPE OF LICENSE	State Fee	Local Fee	State Fee	
1. <input type="checkbox"/> Male, neutered	\$1.00	\$14.00	Local Fee	_____
2. <input type="checkbox"/> Female, Spayed	\$1.00	\$14.00	Enumeration Fee*	_____
3. <input type="checkbox"/> Male, Unneutered	\$3.00	\$22.00		_____
4. <input type="checkbox"/> Female, Unspayed	\$3.00	\$22.00	Total Fees	_____
5. <input type="checkbox"/> Exempt Dogs	No Fee	No Fee		

\*Only when found unlicensed during an enumeration

If Owner is less than 18 years of age, a parent or guardian shall be deemed the owner of record and the information must be completed by them.

\_\_\_\_\_  
Owner's signature Date

\_\_\_\_\_  
Clerk's signature Date

\*\*\* This license is only valid for dogs harbored  
in the Town or Village of Lowville