



TOWN OF SCHROOM

15 LELAND AVE SCHROOM LAKE NY

DOG LICENSE APPLICATION

ISSUING COUNTY CODE/TCV CODE 1546

INSTRUCTIONS

- Your telephone number or email address may be used for the purpose of communication with you about your dog. The telephone number you provide should be the best contact number for you in the event your dog is found
- Licenses are valid for one year and must be renewed annual. A reminder notice will be mailed to the address on file approximately 30 days before
- Each application must be accompanied by a current rabies certificate and proof of spay/neuter, if applicable. If the rabies vaccination certificate indicates that your dog is altered, we will accept the in lieu of the spay/neuter certificate.
- Markings: Please indicate or identify any special or usual markings/patterns or coloration that may help us identify your dog if they are found.
- All dogs 4 months of age or older are required to be licensed by NYS Ag and Markets Law as well as Town of Schroom Local law 1 of 2010
- For validation of this license: Complete sections 1, 2 & 3 and sign. Submit in person or by mail: this application, fee, certificate of spaying/neutering or proof of exemption, proof of rabies vaccination to the issuing clerk in the Town where the dog is harbored.
- Applicants must be 18 years of age or older. If not, the parent will be deemed the owner of record.

LICENSE INFORMATION

ORIGINAL RENEWAL TRANSFER OF OWNERSHIP

LICENSE #

DATE ISSUED

EXPIRES

RABIES VACCINE INFORMATION

MANUFACTURER

SERIAL NUMBER

DATE VACCINATED

DURATION

1 YEAR 3 YEAR

VETERINARIAN

1. OWNER INFORMATION (PERSON WHO HARBORS OR KEEPS THE DOG)

NAME	FIRST	MIDDLE	LAST
ADDRESS	CITY, STATE		ZIP CODE
COUNTY	TOWN, CITY OR VILLAGE		
PHONE	E-MAIL		
IS OWNER LESS THAN 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED.)			
OWNER'S SIGNATURE		DATE	

2. PET INFORMATION

DOG'S NAME	BREED	YEAR OF BIRTH
COLOR(S)	MARKINGS	
MICROCHIP MAKER	MICROCHIP #	

3. TYPE OF LICENSE AND FEES

GENDER	STATE FEE + LOCAL FEE	TOTAL FEE	STATE FEE \$ _____ + LOCAL FEE \$ _____ = TOTAL FEE \$ _____ TO BE PAID TO: <u>TOWN OF SCHROOM</u>	CHECKLIST:
<input type="checkbox"/> MALE, NEUTERED	\$1.00 + \$9.00	= \$10.00		<input type="checkbox"/> COMPLETED APPLICATION <input type="checkbox"/> RABIES VACCINATION CERTIFICATE <input type="checkbox"/> SPAY/NEUTER CERTIFICATE (IF APPLICABLE) <input type="checkbox"/> PAYMENT
<input type="checkbox"/> FEMALE, SPAYED	\$1.00 + \$9.00	= \$10.00		
<input type="checkbox"/> MALE, UN-NEUTERED	\$3.00 + \$17.00	= \$20.00		
<input type="checkbox"/> FEMALE, UN-SPAYED	\$3.00 + \$17.00	= \$20.00		
<input type="checkbox"/> EXCEPTION DOGS: GUIDE, WAR, POLICE, DETECTION	NO FEE			

*You should receive your next year's license renewal by mail prior to the expiration date of this license. If not received, please contact the Town Clerk's office at (518)532-7737 ext 12.