	DOG LICENSE APPLICATION		
(For Office Use Only)	Town of Caroline	RABIES CERTIFICATE REQUIRED	
License No Issue Date	2668 Slaterville Road PO Box 136 Slaterville Springs, NY 14881 607-539-6400 x1	(For Office Use Only) Manufacturer: Serial No.:	
Expiration Date	LICENSE TYPE	One Year Vacc Three Year Vacc.	
	Original Renewal		
Fee:		Date Vaccinated:	
	Transfer of Ownership	Veterinarian:	

## **Annual Fees:**

Spayed or Neutered - \$10 per year (\$1 State spay/neuter surcharge, \$9 local fee) Unspayed/Unneutered - \$22 per year (\$3 State spay/neuter surcharge, \$19 local fee) Residents 65 years old or older - \$5 for spay/neuter dogs (No discount for unaltered dogs)

Exempt – no local fee, must pay state surcharge – Guide dog, war dog, police dog, hearing dog, service dog (Proof Required)

If the owner is under 18? If yes, parent or guardian shall be deemed the owner of record and the information must be completed by them.

**Dog Owner:** Complete the owner and dog identification portions below. Mail or bring to the Town Clerk's Office with **proof of rabies vaccination, proof of spay/neuter if applicable**, and a check payable to the Town of Caroline Clerk for the appropriate amount. A validated copy of the application and license identification tag will be provided to you.

Owner Identification: (Person who owns or harb Last, First, Middle	-	Telephone #	
Street Address, City, State, Zip			
Mailing Address (if different), City, State, Zip			
Dog Identification:			
Spayed or Neutered? (Circle One) Yes No Sex (I	M/F) Microchip #		
Dog Name	Microchip Man	ufacturer	
Breed	Color	Year of Birth	
Signature of Owner Date	Signature of Clerk	Date	
If you have any questions, please call our office at	: 607-539-6400 x 1, Monday/Tuesday	//Thursday 8:00 am – 2:00 pm	

Fn: 2023 Doglicenseapplication