



TOWN OF SMITHTOWN
 Town Clerk-Vincent Puleo
DOG LICENSE

LICENSE TYPE	
Original	Transfer of Ownership
Renewal	Replacement Tag

License #	
Date Issued:	Expiration Date:
Microchip/Tattoo:	
Dog Breed:	
Primary Color:	Secondary Color:
Gender:	Intact Spayed Neutered
Dog Name:	
Birth Year:	

RABIES CERTIFICATE REQUIRED	
Rabies Vaccine	
Manufacturer:	
Serial Number:	
Date Vaccinated:	
Rabies Tag Number: (if applicable)	
One Year Vacc	Three Year Vacc
Veterinarian:	

*****Annual renewal at Town Clerk's Office in which dog owner resides*****

Owner Identification (Person who harbors or keeps dog: (Last First Middle)																											
Mailing Address: House number, street or R.D. number and P.O.Box number																											
City:														State:							Zip Code:						
County:																											
(1) Phone #									(2) Phone #									(3) Phone #									
Email:																											

TYPE OF LICENSE	FEE	*APCP FEE
*Animal Population Control Program		
Male, Neutered	6.00	1.00
Male, Intact -over 4 months	12.00	3.00
Male, Intact -under 4 months	6.00	-
Female, Spayed	6.00	1.00
Female, Intact -over 4 months	12.00	3.00
Female, Intact -under 4 months	6.00	
Exempt	0.00	0.00
Tag Only	4.00	0.00
LICENSE FEE		
APCP FEE		
TOTAL FEE		

Make checks payable to: **SMITHTOWN TOWN CLERK**
All applications must include a copy of current rabies certificate (must state rabies vaccine manufacturer and serial number). Also include, if applicable, proof of spay/neuter.
 Exempt Status (proof must be attached to license application); any guide dog, hearing dog, service dog, war dog, working search dog, detection dog, police work dog, or therapy dog.

MAIL TO: Smithtown Town Clerk 99 West Main St. Smithtown, NY 11787	IN PERSON: At Town Clerk or Smithtown Animal Shelter 410 East Main St. Smithtown, NY 11787
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Is owner is less than 18 years of age? If yes, 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
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