

DOG IDENTIFICATION

License No.		Microchip No.	
Date Issued		Expiration Date	
Dog Breed		Code	
Dog Color(s)		Code(s)	
Other ID	Dog's Yr. of Birth Last 2 Digits		
Markings		Dog's Name	

**Town of Newstead
DOG LICENSE**

LICENSE TYPE

- ORIGINAL RENEWAL
 TRANSFER OF OWNERSHIP

RABIES CERTIFICATE REQUIRED

Rabies Vaccine:
 Manufacturer _____
 Serial Number _____
 One Year Vacc. Three Year Vacc.
 Date Vaccinated _____
 Veterinarian _____

Owner Identification (Person who harbors or keeps dog): Last First Middle Initial _____ **OWNER'S PHONE NO.** _____
 Area Code _____

Mailing Address: House No. Street or R.D. No. and P.O. Box No. _____ Phone No. _____

City _____ State _____ Zip _____

County _____ Town, City or Village _____

TYPE OF LICENSE	Local Fee	State Surcharge	Total
1. ___ Male, neutered	9.00	1.00=	10.00
2. ___ Female, spayed	9.00	1.00=	10.00
3. ___ Male, unneutered	17.00	3.00=	20.00
4. ___ Female, unspayed	17.00	3.00=	20.00
5. ___ Exempt dog Type: _____			

PLEASE CONSIDER MAKING AN OPTIONAL DONATION TO Erie County SPCA \$ _____
 (Include with your payment to the Town of Newstead)

IS OWNER LESS THAN 18 YEARS OF AGE? YES NO IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED BY THEM.

Return form, current rabies certificate, spay/neuter certificate (if applicable) and check made out to "Newstead Town Clerk" to:
 Newstead Town Clerk
 P.O. Box 227
 Akron, NY 14001

_____ Owners Signature/Date _____ Clerk's Signature/Date