

If you are mailing your dog license application:

Mail to: The Town of Addison  
P.O. Box 481  
Allenton, WI 53002-0481

Make checks payable to: The Town of Addison

Include a self-addressed, stamped envelope for the return your dog's license.

Include a \$5.00 late fee, if applying after April 1<sup>st</sup>, and this is not a new dog.

STATE OF WISCONSIN  
WASHINGTON COUNTY

APPLICATION/LICENSE FOR DOG

Date \_\_\_/\_\_\_/20\_\_\_

Town of ADDISON

Dog License No. leave blank

Name-Owner/Keeper  
of Dog

Phone \_\_\_\_\_

Last

First

Address \_\_\_\_\_

Name of Dog \_\_\_\_\_ Color \_\_\_\_\_ Breed \_\_\_\_\_

RABIES TAG NO. \_\_\_\_\_  Male \$10.00  Female \$10.00

EXP. DATE \_\_\_/\_\_\_/20\_\_\_  Neutered \$5.00  Spayed \$5.00

Veterinary Name \_\_\_\_\_ Phone \_\_\_\_\_

DOG OWNER SIGNATURE: \_\_\_\_\_

Signed verification of current rabies information as herein recorded.

BY THE UNDERSIGNED, THE REQUIRED FEE OF \$ \_\_\_\_\_ HAS BEEN RECEIVED FOR THIS 20\_\_\_  
DOG LICENSE ISSUED ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_, ( ) \$5.00 LATE FEE PAID.  
See Back Side LICENSING OFFICIAL \_\_\_\_\_

**RETURN TO LICENSING OFFICIAL**

Please fill out, and sign if applicable.

Due to the disposition checked below, a 20\_\_\_ dog license is not required by listed owner, for the  
dog described on the reverse side of this card, because: ( ) Died or Killed, ( ) Sold or Given To:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ T/V/C of \_\_\_\_\_ County \_\_\_\_\_

Other \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/20\_\_\_

Penalties, Fees and Court Costs may be imposed by Governing Agencies for violation of dog  
licensing laws. Current Rabies Information must be submitted before a dog license can be  
issued. A \$5.00 late fee shall be collected (when applicable) from owners of dogs not licensed  
by April 1st of each year. Make checks payable to the Town of Addison and mail to:

TOWN OF ADDISON, P.O. BOX 481, ALLENTON, WI 53002-0481