

Town of Hague Dog License Application

*New York State Law requires that all dogs older than 4 months must be licensed
in the Town, City or Village where the dog is harbored for a duration of 30 days or more.*

Please complete all information

Date of Application: _____

OWNER INFO:

Owner Name: _____

Phone Number: _____ Email: _____

Address: *(please provide both mailing and street address)*

DOG INFO:

Breed:* _____ **If mixed breed indicate dominate breed if known
(i.e. Lab mix, Shepard mix, Terrier mix, etc.)*

Primary Color: _____

Secondary Color: _____

Tattoo #: _____

Markings: _____

Name: _____

Gender: _____

Birth Year: _____

Spayed/Neutered?* Yes No

**If yes, please provide a photocopy of the Spay/Neuter
Certificate from the Veterinarian*

RABIES INFO:

Please be sure to provide a photocopy of the Rabies Certification from the Veterinarian

Veterinarian Name: _____

Vaccine Manufacturer: _____

Serum Lot Number: _____

Rabies Tag Number: _____

Vaccination Date: _____

Vaccination Length: 1 YEAR 2 YEARS 3 YEARS

LICENSE FEE: \$4.00 Spayed/Neutered \$12.00 Unspayed/Unneutered

Please make check or money order payable to:

**Town of Hague, Town Clerk
PO Box 509
Hague, NY 12836**