

TOWN OF JACKSON

MAIL-IN DOG LICENSE

TO LICENSE A DOG(S):

1. Complete the information in the box below
2. Send a copy of the rabies certificate (canNOT be receipt of payment)
3. Send proof of spayed or neutered (if applicable)
4. Check made payable to: **Town of Jackson - 2355 State Route 22, Cambridge, NY 12816**
Spayed/Neutered Dog \$5 license fee/dog
Unspayed/Unneutered Dog \$10 license fee/dog

NOTE: Purebred Licenses must be applied for in-person

(please print)

Owner's Name: _____
Owner's Address: _____
Mailing Address (if different): _____
Phone Number: _____ Email: _____
Owner's Signature: _____

DOG #1

Dog's Name: _____ Birth Year: _____ Sex: ____ Female ____ Male
Dog Breed: _____ Dog's Color(s) primary _____ secondary _____
Distinguishing Markings (if any) _____

DOG #2

Dog's Name: _____ Birth Year: _____ Sex: ____ Female ____ Male
Dog Breed: _____ Dog's Color(s) primary _____ secondary _____
Distinguishing Markings (if any) _____

DOG #3

Dog's Name: _____ Birth Year: _____ Sex: ____ Female ____ Male
Dog Breed: _____ Dog's Color(s) primary _____ secondary _____
Distinguishing Markings (if any) _____

****Upon receiving this form with information to license a dog(s), an original license will be printed and mailed with a dog tag. The owner will receive an annual renewal notice in one year via mail or email. The notice will indicate whether or not a proof of updated rabies vaccination is required.**

THANKS FOR YOUR COOPERATION!