

FEES

Up to (and including) February 1, 2025

\$37.50 per spayed/neutered dog **(DDOG1)**
\$50.00 per intact dog **(DDOG2)**

After February 1, 2025

\$42.50 per spayed/neutered dog **(DDOG3)**
\$55.00 per intact dog **(DDOG4)**

OWNER INFORMATION

Name _____
House # _____ Rd./St. Name _____
Town _____ Postal Code _____ Phone No. _____

OFFICE USE

Total Paid:

\$ _____

- CASH
 CREDIT
 CHEQUE
 DEBIT

NOTE: Proof of spay/neuter is required for all **NEW** Licences.

Signed Affidavit/Proof of Rabies vaccinations is required for **all** applications

DOG INFORMATION

1) Name _____ Age _____ Tag No. Issued _____

Breed _____ Colour _____ Fee \$ _____

- | | | | |
|---------------------------------|-----------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Neutered | <input type="checkbox"/> Microchip | <input type="checkbox"/> NEW |
| <input type="checkbox"/> Female | <input type="checkbox"/> Spayed | <input type="checkbox"/> Tattoo (location) _____ | <input type="checkbox"/> RENEWAL |
| | | | <input type="checkbox"/> REPLACEMENT |

2) Name _____ Age _____ Tag No. Issued _____

Breed _____ Colour _____ Fee \$ _____

- | | | | |
|---------------------------------|-----------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Neutered | <input type="checkbox"/> Microchip | <input type="checkbox"/> NEW |
| <input type="checkbox"/> Female | <input type="checkbox"/> Spayed | <input type="checkbox"/> Tattoo (location) _____ | <input type="checkbox"/> RENEWAL |
| | | | <input type="checkbox"/> REPLACEMENT |

3) Name _____ Age _____ Tag No. Issued _____

Breed _____ Colour _____ Fee \$ _____

- | | | | |
|---------------------------------|-----------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Neutered | <input type="checkbox"/> Microchip | <input type="checkbox"/> NEW |
| <input type="checkbox"/> Female | <input type="checkbox"/> Spayed | <input type="checkbox"/> Tattoo (location) _____ | <input type="checkbox"/> RENEWAL |
| | | | <input type="checkbox"/> REPLACEMENT |

I hereby verify that the information provided herein is true and correct and that by signing this I agree to conform to all municipal by-laws and/or the Animal Pedigree Act of Canada.

Applicant Signature _____ Date _____