

# Town of Crescent

## Dog License Application

Owner's Name \_\_\_\_\_

Street Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Are there any dog(s) you have licensed within the last year that are no longer in the household? Yes or No  
 If yes, please provide the dog(s) name(s) \_\_\_\_\_

	DOG 1	DOG 2	DOG 3
Dog's Name			
Color			
Breed			
Sex (select one)			
Male \$15.00			
Neutered Male \$5.00			
Female \$15.00			
Spayed Female \$5.00			
<b>PROOF OF RABIES VACCINATION IS REQUIRED BEFORE LICENSE IS ISSUED</b>			
Rabies Serial Number			
Rabies Mfg Name			
Rabies Date Given			
Rabies Date Expires			
Veterinary Clinic			
Dog Tag Number			

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Total Paid (Cash/Check): \$\_\_\_\_\_

***The license year is January 1 through December 31. A \$5.00 penalty per dog will be assessed after April 1st***

Please complete form, sign, and return  
 this form along with the appropriate fees and proof of rabies to:  
 Town of Crescent  
 6661 Round Lake Rd.  
 Rhinelander, WI 54501

Chapter 174 Wisconsin Statutes requires all dogs five months or older be licensed.

**When you license your dog, the fees directly support  
 the Oneida County Humane Society (OCHS) and  
 the services OCHS provides which includes keeping  
 stray pets safe and helping them find their way home.**