# Town of Pelican
## Application/License for Dogs

Date_____, 20_____

Owner's Name_____

Owner's Address_____

City – Zip Code _____

Name of Dog _____

Sex (Please Select) M ◯ NM ◯ F ◯ SF ◯

Breed_____ Age_____

Color _____ Markings_____

**FEES:** (Please select Appropriate Fee)

$15.00 Male ◯ $5.00 Neutered Male ◯

$15.00 Female ◯ $5.00 Spayed Female ◯

**PENALTIES:** A late fee of $5.00 shall be assessed the owner of each dog 5 months of age or over who fails to obtain a dog license by April 1, 2020. (SUBJECT TO THE PROVISIONS OF CHAP. 174 OF THE STATUTES)

The Above Dog Was Vaccinated Against Rabies:

On_____ 20_____

Veterinarian_____

Vaccine Mfg. _____

Serial No. of Vaccine_____

Expiration Date_____ 20_____

Owner Signature_____

Date _____

Please enclose SASE (Self-addressed stamped envelope)

Return with appropriate fee to:

Cindy Carroll Treasurer – Town of Pelican
P.O. Box 1460, Rhinelander, WI 54501


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