



# DOG LICENSE APPLICATION

**TOWN OF LISBON**  
W234 N8676 Woodside Rd.  
Lisbon, WI 53089

Dog Licenses are due January 1 (yearly). If your dog is not licensed by April 1, a \$10 late penalty (per dog) will be added to the regular license fees. In addition, a citation could be issued to you by the Sheriff's Department for failure to license your dog. **Proof of rabies vaccine showing name of veterinarian and date of vaccine, as well as expiration date is required before license can be issued, per state statutes.** Please include a copy of the current **Rabies Vaccine Certificate** with this application. If mailing please provide a self-addressed stamped envelope. Please make checks payable to **TOWN OF LISBON. \$15 In-Tact; \$10 Neutered/Spayed**

OWNER'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

OWNER'S EMAIL: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_  
Full Street Address City State Zip

### DOG #1

DOG'S NAME: \_\_\_\_\_ BREED / COLOR: \_\_\_\_\_

SEX:                    MALE                    FEMALE                    NEUTERED                    SPAYED                    (Circle One)

VET CLINIC NAME & PHONE #: \_\_\_\_\_

DATE OF SHOT: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

RABIES SHOT MANUFACTURER: \_\_\_\_\_ LOT/SERIAL #: \_\_\_\_\_

### DOG #2

DOG'S NAME: \_\_\_\_\_ BREED / COLOR: \_\_\_\_\_

SEX:                    MALE                    FEMALE                    NEUTERED                    SPAYED                    (Circle One)

VET CLINIC NAME & PHONE #: \_\_\_\_\_

DATE OF SHOT: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

RABIES SHOT MANUFACTURER: \_\_\_\_\_ LOT/SERIAL #: \_\_\_\_\_

### DOG #3

DOG'S NAME: \_\_\_\_\_ BREED / COLOR: \_\_\_\_\_

SEX:                    MALE                    FEMALE                    NEUTERED                    SPAYED                    (Circle One)

VET CLINIC NAME & PHONE #: \_\_\_\_\_

DATE OF SHOT: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

RABIES SHOT MANUFACTURER: \_\_\_\_\_ LOT/SERIAL #: \_\_\_\_\_

#### FOR OFFICE USE ONLY

DOG #1 LICENSE #: \_\_\_\_\_ DOG #2 LICENSE #: \_\_\_\_\_ DOG #3 LICENSE #: \_\_\_\_\_

AMOUNT DUE: \$ \_\_\_\_\_

Cash

Check / Check #: \_\_\_\_\_