



Dog License Application



Owner's Name _____

Street _____

City _____ State _____ Zipcode _____

Telephone Number (____) _____

Dog's Name: _____ Breed: _____

Color: _____ Age: _____ Sex: _____

Fee Schedule **(Please Check One)**

Male/Female \$19.00

Male/Neutered \$8.00

Female/Spayed \$8.00

Amount Enclosed \$ _____

Please include Spay/Neuter certificate (if applicable) and Rabies Vaccination certificate with this application. Originals will be returned with license.

Note: Applicants must include a self addressed stamped envelope.

Please return this application to:

**Griswold Town Clerk
28 Main Street
Griswold, CT 06351**

Licensing Facts

All dogs over six months **must** be licensed.

All dogs **must** be licensed by June 30th of each year. A one dollar fee **will** be charged for each month late.

All dogs **must** have a current rabies vaccination.

Licensing provides vaccination and sterilization benefits for pets.

A license is a lost dog's ticket home.

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