DOG LICENSE APPLICATION

Town of Chester
1786 Kings Highway Chester, NY 10918
(845) 469-7000 Ext. 4

Dog's Name	
Microchip/Tattoo #	Birth Year
Dog Color	Markings
Dog Breed	

FOR OFFICE USE ONLY

LICENSE TYPE:

☐ ORIGINAL ☐ TRANSFER OF OWNERSHIP

License #: _____

Tag #: _____

Last Name, First Name, Middle Initial of Owner or Person who harbors or keeps this dog:

Mailing Address:

City: State: Zip Code:

Email:

Primary Phone #: Alternate Phone #:

	Type	Fee
	Male-Neutered	$10.00
	Female-Spayed	$10.00
	Male-Unneutered	$20.00
	Female-Unspayed	$20.00
	Exempt (Service/Support)	$0.00
	Replacement Tag	$3.00

**FEE IS WAIVED FOR DOG OWNERS OVER THE AGE OF 65, PROOF OF AGE REQUIRED

ATTACHMENTS REQUIRED:

Current Rabies Vaccination Certificate & Spayed/Neutered Documentation

Is owner less than 18 years of age? ☐ Yes ☐ No

If yes, parent or legal guardian of said "Owner" shall be deemed the "Owner of Record" and this application must be completed by them.

OWNERS SIGNATURE _____ DATE:_____

CLERK'S SIGNATURE _____ DATE:_____