

TOWN OF BRANT DOG LICENSE APPLICATION

(716) 549-0282 EXT 2

Mail application to: Brant Town Clerk, PO Box 228, Brant, NY 14027

OWNER INFORMATION:

Name: _____ Phone #: _____
Last, First

Mailing address: _____

Physical location where dog resides: _____

Email address: _____

Is the owner 18 or older? Yes or No

If Yes, what is the parent's name:

Owner's Signature: _____

DOG'S INFORMATION:

Dog's Name: _____ Sex: Male or Female. *(if Spayed or Neutered, provide certificate)*

Breed: _____ Year of birth: _____

Color: _____

DEPARTMENT USE:

OWNER'S MUST PROVIDE RABIES CERTIFICATE

Veterinarian's Name: _____

Date of Vaccine: _____ 1 YR or 3 YR

Micro-chip# _____

LICENSE FEE:

Make your check payable to: "Town of Brant"

If your dog is spayed or neutered, make check in the amount of \$5.00 *(Spay/Neuter Certificate is required)*

If your dog is NOT spayed or neutered, make your check in the amount of \$13.00

Fee Exempt: To be exempt from fees, the dog must be currently working as a guide, war, detection, therapy, working search, hearing or service. **MUST SUBMIT PAPERWORK**

**ALL DOGS 4 MONTHS OF AGE OR OLDER MUST BE LICENSED IN THE TOWN OF BRANT
UNLESS THE PUPPY IS PICKED UP FOR RUNNING AT LARGE, THEN IT MUST BE
LICENSED REGARDLESS OF AGE OR RESIDENCE.**