TOWN OF LAWRENCE APPLICATION FOR DOG LICENSE					
OWNER INFORMATION					
Name:					
Address:					
City:		State:	ZIP C	ode:	
Phone:		Email:			
DESCRIPTION OF DOG					
Name of Dog:					
Sex:	☐ Male \$10.00	☐ Female \$10.00	☐ Neutered Male \$5.00	☐ Spayed Female \$5.00	
Breed:	Color: Mirco-Chip#:				
Veterinary Office Name: Phone#:					
ENCLOSE CERTIFICATE FROM VET OFFICE**					
Date Given:		Date Expires:	Vacci	ne Manufacturer:	
Serial Number:					
DESCRIPTION OF DOG					
Name of Dog:					
Sex:	☐ Male \$10.00	☐ Female \$10.00	☐ Neutered Male \$5.00	☐ Spayed Female \$5.00	
Breed:		Color:	Mirco-Chip#:		
Veterinary Office Name: Phone#:					
ENCLOSE CERTIFICATE FROM VET OFFICE**					
Date Given:		Date Expires:	Vaccine Manufacturer:		
Serial Number:					
LICENSING INFORMATION					
 Town of Lawrence Ordinance requires that all dogs over five (5) months of age be vaccinated against rabies and licensed. Fee for dog license: \$5.00 for spayed/neutered (OR) \$10.00 for non-spayed/neutered; After March 31st additional \$5.00 late fee per dog Rabies Vaccinations: The rabies vaccination, which must be valid through the license period, is a mandatory prerequisite to the issuance of a license. License Period: Dog license(s) must be renewed annually and are valid for one year from January 1 through December 31. Town of Lawrence Ordinance limits no more than two (2) dogs on property zoned residential 					
PAYMENT INFORMATION					
 Make check payable to Town of Lawrence. Enclose a copy of rabies certificate(s) Self-Addressed, Stamped Envelope for mailing of tag Mail to: Town of Lawrence 2400 Shady Court Fax#: 920-336-9193 De Pere, WI 54115 Email: Townlaw@lawrencewi.gov Amount Enclosed: \$ For Number of Dogs: 					
FOR OFFICE USE ONLY					
NOTIFICATION OF RECEIPT/ISSUANCE					

NOTIFICATION OF RECEIPT/ISSUANCE				
Date Received:	Check #			
Date Issued:	License#			