TOWN OF FARMINGTON - DOG OWNERS

WHO NEEDS A LICENSE: Every person who owns, harbors, or keeps a dog more than five (5) months of age on January 1st, or five months of age *within* the license year shall annually, or within 30 days from date such dog becomes 5 months of age, pay the dog license fee and obtain a license as provided by the provision of Chapter 174 of the Wisconsin Statues.

LICENSING DEADLINE: **March 31st**, or within 30 days of acquiring a licensable dog, if delinquent in licensing the district attorney will be notified.

LATE FEE: A $5 *per dog* late filing fee for failure to license by deadline will be charged and must be sent with license fee.

REQUIRED: State law requires each dog over five (5) months of age to be vaccinated against rabies by a veterinarian. ***A copy of the rabies vaccination for each dog from the veterinary clinic showing the expiration date*** *and* ***vaccine manufacturer is required****, failure to provide the required documentation will prevent your dog from being licensed.*

HOW DO I GET A LICENSE: Complete *entire* application and return with a *separate check* for the correct fee for all dogs being licensed. ***If mailing application, include a self-addressed, stamped envelope for your dog tags***. *Mail application and payment to:* Kenneth Ramthun, Treasurer, Town of Farmington, 7555 Forest View Road, West Bend, WI 53090.

PAYMENT: Check made payable to: Town of Farmington

NO LONGER HAVE DOG: Notify treasurer to be removed from the list.

---------- COMPLETE BOTTOM PORTION AND RETURN WITH PAYMENT AND SELF-ADDRESSED, STAMPED ENVELOPE ----------

DOG LICENSE APPLICATION: ENTIRE APPLICATION MUST BE COMPLETED TO RECEIVE A LICENSE

Owner's Name:_____ **Phone #** (Required)_____

Address:_____

City:_____ **State**:_____ **Zip:**_____

DOG INFORMATION

Dog's Name:_____

Color:_____

Breed:_____

Sex (Circle One):

Male:	$10
Neutered Male:	$5
Female:	$10
Spayed Female:	$5

Vet. Clinic:_____

Rabies Exp. Date:_____

Vaccine Mfr:_____

NOTE: A copy of Rabies Vaccination from Vet. Clinic is REQUIRED to receive license.

DOG INFORMATION

Dog's Name:_____

Color:_____

Breed:_____

Sex (Circle One):

Male:	$10
Neutered Male:	$5
Female:	$10
Spayed Female:	$5

Vet. Clinic:_____

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Rabies Exp. Date:_____

Vaccine Mfr:_____

NOTE: A copy of Rabies Vaccination from Vet. Clinic is REQUIRED to receive license.

Multiple Dog (Kennel) License Fee:	$35 (for 4 to 12 dogs), and $3 for each dog in excess of 12 dogs
(Valid only by Conditional Use Permit)	If more than 3 dogs include information for each dog on a separate sheet.