

***1880 S. Stoughton Road Madison WI 53716***

***Phone 608-223-1104 \* Fax 608-223-1106***

***www.blmgrove.com***

**2018 Dog License for the Town of Blooming Grove, Dane County, Wisconsin**

Dog licenses are effective January 1 through December 31 of a calendar year. If your dog is unlicensed, a citation may be issued to you by the Dane County Sheriff for failure to license your dog. Determine the appropriate category for your dog and fill out the owner anddog information below.

**CHECK ONE:**

Neutered Male \_\_\_ ($10) Unaltered Male \_\_\_ ($15) Spayed Female \_\_\_ ($10) Unaltered Female \_\_\_ ($15)

**A Late Fee of $5 will be charged if licensed issued after April 1 (per state statute).**

**Total Due:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Cash\_\_\_\_\_ Check#\_\_\_\_\_\_\_\_\_\_

**NOTE:** Proof of rabies vaccine showing vet name, date of vaccine and expiration date is required by state law before license can be issued. We accept cash or check as forms of payment. Checks are to be made payable to the Town of Blooming Grove.

**OWNER INFORMATION [Please Print Clearly]**

Owner Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Day Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOG INFORMATION**

Dog’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Rabies Shot\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rabies Tag Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use Only**

**License Issued by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**