

Town of Trenton New Multiple Dog License Application Form

Property Owner(s): _____

Address: _____

Phone #: _____ Date of Birth: _____

Name of the day-to-day operator (If different from the property owner):

_____ Address: _____

Phone #: _____ Date of Birth: _____

Number of dogs: _____

Please give a specific description of the premises where the dogs are to be kept:

Multiple dog license and rabies vaccine information:

State and local law requires proof of current rabies vaccine for dogs over five months of age. **A dog license cannot be issued without the rabies tag number and month, day and year of expiration of the rabies vaccine.** This information must be recorded on the multiple dog license application with verification by the owner's signature.

Veterinarian Name: _____ Phone #: _____

Dog Information:

NUMBER	NAME	BREED	COLOR	SEX	RABIES TAG #	RABIES EXPIRES MM/DD/YY
1						
2						
3						
4						
5						
6						

NUMBER	NAME	BREED	COLOR	SEX	RABIES TAG #	RABIES EXPIRES MM/DD/YY
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Fee schedule: \$100.00 for twelve (12) dogs or fewer; an additional \$5.00 for each dog in excess of twelve.

Amount Paid \$ _____ Additional Paid \$ _____

Site Inspection Approval: By checking this box, I give the Town Of Trenton Police Department access to the proposed multiple dog premises.

Background Check Approval: By checking this box, I give the Town of Trenton Police Department approval to investigate the background of the owners/operators of the proposed multiple dog license.

OWNER'S SIGNATURE _____