

DOG LICENSE APPLICATION

Owner Name _____
 Street Address _____
 Mailing Address _____
 Phone #: _____
 Email Address: _____

Village of Reeseville
 206 S. Main Street
 P O Box 426
 Reeseville, WI 53579
 Phone: 608-575-3097

License Fees (Valid January 1 to December 31)

Neutered/Spayed \$10.00 x _____ = \$ _____
 NOT Neutered/Spayed \$15.00 x _____ = \$ _____
 Additional Dog Fee (Per dog over 2) \$25.00 x _____ = \$ _____
 Late Fee (after March 31) \$25.00 x _____ = \$ _____

(Separate Check from taxes and utility bills)

Amount Paid \$ _____
 Check Payable to: "Village of Reeseville" Cash/Check # _____

****Please include a self addressed, stamped envelope, to return your tag(s).****

<p><input type="checkbox"/> Attach copy of Rabies Certificate</p> <p><input type="checkbox"/> Attach copy proof of spayed/neutered</p> <p>Name of Dog _____ Breed _____ Color _____ Rabies Vac. Date _____ Expiration Date _____ Vet or Clinic Name _____</p> <p>Check one: <input type="checkbox"/> Male <input type="checkbox"/> Neutered Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed Female</p> <p>License No _____ Date _____</p>	<p><input type="checkbox"/> Attach copy of Rabies Certificate</p> <p><input type="checkbox"/> Attach copy proof of spayed/neutered</p> <p>Name of Dog _____ Breed _____ Color _____ Rabies Vac. Date _____ Expiration Date _____ Vet or Clinic Name _____</p> <p>Check one: <input type="checkbox"/> Male <input type="checkbox"/> Neutered Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed Female</p> <p>License No _____ Date _____</p>
<p><input type="checkbox"/> Attach copy of Rabies Certificate</p> <p><input type="checkbox"/> Attach copy of spay/neuter</p> <p>Sign "Additional Dog Agreement" on the reverse side if you have 3 or more dogs.</p>	

FOR OFFICE USE ONLY



206 S Main St.
Reeseville, WI 53579
Phone: (608) 575-3097
E-mail: ReesevilleClerk@gmail.com

Additional Dog Agreement

Village of Reeseville Code of Ordinances, Section 7-1

I, _____ residing at _____,
Name Address

in the Village of Reeseville, hereby acknowledge that I am aware of the Village of Reeseville's Municipal Code, limiting the number of dogs allowed per household, to two (2). As a result of owning or keeping more than two (2) dogs on the premises at the address above, I, _____, agree that if two (2) formal written nuisance complaints

Name
caused by or related to the dogs at the above premises, is received by the Reeseville Police Department within a four (4) week period, I must immediately reduce the number of dogs on the premises to two (2).

Signature Date

Tag Numbers Issued: _____

In addition to the applicable license fee for each dog, an additional fee of **\$25.00** per additional dog will be charged for the third and all subsequent licenses issued per household.

Total Additional Fee: \$25.00 times # _____ additional dogs = \$ _____

Plus Regular Dog License Fees = \$ _____

Total Amount due \$ _____

Make Check Payable to: Village of Reeseville

For Office Use Only:
Cash \$ _____ OR Check # _____ Date: _____