

## **TOWN OF WEST TISBURY** Office of the West Tisbury Town Clerk 508-696-0148 – <u>townclerk@westtisbury-ma.gov</u>

**Application for a Dog License** (For Dogs Six Months or Older)

## →<u>NEW FOR 2018</u>: YOU CAN NOW FILE AND PAY FOR THIS APPLICATION ONLINE AT

https://epay.cityhallsystems.com/

<b>OWNER INFORMA</b>	ΓΙΟΝ:				
Owner Name:					
Physical Address:					
Mailing Address:					
U					
Telephone number(s):					
[These numbers are not pub	olic information	but w	vill help us contact you in t	the event your dog is mis	sing.]
<b>DOG INFORMATIO</b>	N:				
Name:		_	Microchip Co. & No.		
Breed:		_	Second/Sub Breed:		
Color:			Second Color:		
Sex:			Neutered/Spay	ed?	_
Age:					
Rabies Expir. Date:			_ <_	We must have the cu	
1				expiration date to iss	ue a license.
Veterinarian:					
FEES:					
Checks should be made	e out to the "	Fown	of West Tisbury" and	d returned with this	
completed form. Refer					
License Type	Quantity		Fee	Totals	
Male		Х	\$10.00	}	NO CHARGE
Neutered Male		Х	\$6.00	}	for owners
Female		Х	\$10.00	}	over 70
Spayed Female		Х	\$6.00	}	over 70
Postage (per household – m	ailed tage only)			\$2.00	
<b>Total Payment Enclosed:</b>	ancu tags only)	•		<u> </u>	
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Additional blank Dog License Application forms are available on the Town website at www.westtisbury-ma.gov/Boards/town-clerk.html