TOWN OF WASHINGTON
EAU CLAIRE COUNTY, WISCONSIN

5750 Old Town Hall Road
Eau Claire WI 54701
(715)834-3257
Fax (715)834-3325
www.townofwashington.org

$55.00 per 12 dogs
$6.00 per dog after 12

APPLICATION FOR MULTIPLE DOG LICENSE

Date of application _____ License expires December 31, 20____

Full name of applicant _____

Address of applicant _____

Name of Kennel _____

Address of Kennel _____

Home phone # _____ Kennel phone #_____

Number of Dogs _____

Housed Indoors _____ Housed Outdoors _____

INCLUDE WRITTEN PROOF FROM YOUR VETERINARIAN OF CURRENT RABIES AND WHETHER THE DOG IS SPAYED OR NEUTERED WITH THIS APPLICATION

Name	Sex	Breed	Rabies License #	Date Given	Date Expired	(Office Use Only) License #

Veterinary Hospital _____ Veterinary Doctor _____

Having knowledge of all governmental laws, rules or regulations governing the keeping or protection of animals, I hereby certify that all statements made in the foregoing application are true and correct.

_____ _____
Signature of Applicant(s)

Revised 3-11