

**Town of Cambridge
Dog License**

License #: _____ Date: _____
Name: _____ License Expires: _____
Sex: ____ Birth Year: _____ Original ____ Renewal ____ Transfer ____
Breed: _____ Local (4.00 spay/neuter 12.00 unspay/unneuter)
Color: _____ State Fee (1.00 spay/neuter 3.00 unspay/unneuter)
Spay/Neuter: Yes ____ No ____ Pay This Amount (annually): \$ _____

Owner Name: _____
Address: _____
City, State, Zip _____
Phone# - email address _____

RABIES IMMUNIZATION – MUST SUPPLY PROOF

Vaccination Date: _____
Vac. Expiration Date: _____
Veterinarian: _____
Manufacturer: _____
SerialNo.: _____

Please place a check next to any applicable changes:

- Dog is Deceased
- Dog is Lost or Stolen
- Change of Address
- Transfer of Ownership

Transfer of Ownership:

Instructions for Owner of Record – Complete this form and give it along with the ID tag to the new owner.

Instructions for New Owner – Present this form to the clerk of the Town, city, or village in which the dog is to be harbored to transfer the license into your name.

Owner's Signature

Date

Town Clerk's Signature

Date

Make Checks Payable & Mail to:

Town of Cambridge
846 County Rt. 59
Cambridge, NY 12816

<http://www.townofcambridgeny.org>