## **TOWN OF BURKE**

5365 Reiner Road, Madison, WI 53718 • (608) 825-8420 • TownofBurke.com

## DOG LICENSE APPLICATION

## NON-REFUNDABLE FEES: \$25 EACH SPAYED/NEUTERED DOG, \$40 EACH UNALTERED DOG

Checks must be separate from property tax payment. Include self-addressed, stamped envelope to receive tag(s) by mail.

WI Statute 174.07 requires all dogs over five months of age be licensed each calendar year. Licenses must be obtained annually before April 1 to avoid late fee of \$5. A current certificate of rabies vaccination showing date of vaccination, expiration of vaccination and rabies tag number must be provided to obtain a license. Town of Burke Ordinances prohibit keeping more than three dogs at a premises. If you have more than three dogs, a separate kennel license is required.

**OWNER INFORMATION** 

PHONE

OWNER NAME

STREET ADDRESS			CITY/STATE/ZIP			
DOG #1						
NAME	BREED			COLOR		
SEX (choose one)	DOG SPAYED/NEUTERED? (choose one)			RABIES EXPIRATION		
MALE / FEMALE		YES / NO				
		DO	G #2			
NAME	BREED			COLOR		
SEX (choose one)	DOG SPAYED/NEUTERED? (choose one)			RABIES EXPIRATION		
MALE / FEMALE		YES / NO				
		-				
		DO	G #3			
NAME		BREED			COLOR	
SEX (choose one)		DOG SPAYED/NEUTERED? (choose one)			RABIES EXPIRATION	
MALE / FEMALE		YES / NO				
hereby certify informati	ion provided on this j	form is true and cori	rect and ha	ıve <u>included</u> <u>ce</u>	rtificates <u>of</u> rabies	<u>s vaccination</u> for each
APPLICANT SIGNATURE:				DATE:		
OFFICE USE:						
OOG 1 TAG # ISSUED	DOG 2 TAG # ISSUED	DOG 3 TAG # ISSUED		TAGS ISSUED BY (Cle	rk or Deputy):	DATE ISSUED:
ICENSE FEES:	LATE FEES:	TOTAL DUE:		PAYMENT TYPE:  CASH / CARD / CHECK #		