

## DOG LICENSE APPLICATION

## **Owner Information**

Name:	
Address:	
Ypsilanti, MI Zip: Email:	
Phone:	Additional Phone:
If this is a rental property, do you have the	Landlord's permission to keep a dog? $\ \square$ Yes $\ \square$ No
Landlord/Owner Name:	
Dog Information	
Name:	Breed:
Color/Markings:	
$\square$ Male $\square$ Neutered	□ Female □ Spayed
Birth Year: Month:	or Approximate Age:
Which veterinary clinic gave the rabies vac	ccine?
Date of Rabies Vaccine: Date	e Due for Next Rabies Vaccination:
<u>Fees</u>	
The license length cannot exceed the rapperwork before selecting your license	abies expiration date. Check your rabies e length. Do not put cash in the mail.
<ul><li>□ \$3 for a 1 year License</li><li>□ \$6 for a 2 year License</li></ul>	
☐ \$9 for a 3 year License	

Mail this application form, a valid rabies vaccination certificate and payment to:

Ypsilanti Township Treasurer 7200 S. Huron River Drive Ypsilanti, MI 48197

We will return your rabies certificate with your new license and tag.

Did you lose your dog license tag? Unsure which license length to choose? Call or email our office! 734-544-4000 ext 3 or treasurer.info@ypsitownship.org