

# MENDON CITY

## DOG LICENSE APPLICATION

### JANUARY 1 - DECEMBER 31, 2026

OWNER OF DOG(S): \_\_\_\_\_ DATE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_  
(Location Dog will be kept.)

MAILING ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

ALTERNATE CONTACT PERSON/PHONE: \_\_\_\_\_

OWNER'S E-MAIL: \_\_\_\_\_

NAME OF DOG: _____	BREED: _____	
COLOR: _____	AGE: _____	
GENDER: (circle one)	Male	Female
SPAYED/NEUTERED: (circle one)	Yes	No
Rabies Vaccine Expiration date: _____		

NAME OF DOG: _____	BREED: _____	
COLOR: _____	AGE: _____	
GENDER: (circle one)	Male	Female
SPAYED/NEUTERED: (circle one)	Yes	No
Rabies Vaccine Expiration date: _____		

\*\*Annual License Fee: \$5 fixed dog, \$10 non-fixed dog. Kennel Fee (3 or more dogs): additional \$40.  
License Fees double after April 15th. *Proof of current Rabies Vaccine Required.*

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OFFICE USE ONLY

TAG(S) # ISSUED: \_\_\_\_\_

AMOUNT PAID: \_\_\_\_\_ SIGNATURE OF APPROVAL: \_\_\_\_\_