



**TOWN OF ISLIP**  
**OFFICE OF THE TOWN CLERK**

**Dog License Application**

Owner Identification: (Any person who harbors or keeps the dog)

Name of owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State/Zip

Dog Identification:

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Primary Color: \_\_\_\_\_ Secondary Color: \_\_\_\_\_

Birth year: \_\_\_\_\_ Sex: Male Female

**\*\*FOR OFFICE USE ONLY\*\***

License Tag No: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Vaccinated: \_\_\_\_\_ # Yrs: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Serial No: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

Type of License:

- Spayed/Neutered:.....\$6.00
- Unspayed/Unneutered 4 months and over:.....\$13.00
- Unspayed/Unneutered under 4 months: .....\$10.00
- Exempt Dogs: ..... NO FEE  
(Guide dogs, police, detection, working search, hearing and service)

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of clerk: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: Return this form with all of the following:**

- Check or money order payable to the Islip Town Clerk
- A Valid Rabies Certificate
- A Spay/Neuter Certificate