

BAYFIELD COUNTY DOG LICENSE APPLICATION FORM FOR ALL DOGS

FEES: \$5.00 (SPAYED OR NEUTERED) OR \$12.00 (NOT SPAYED OR NEUTERED)

OWNERS NAME: _____

BARNES STREET ADDRESS: _____

NAME OF DOG: _____ AGE OF DOG: _____ BREED/COLOR _____

The dog named above was vaccinated against rabies on: ___/___/___ VET NAME: _____

Vaccine Mfg.: _____ Serial #: _____ Exp. Date: _____

Please provide a copy of the vaccination form