

# VILLAGE OF HOBART

## DOG LICENSE APPLICATION

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

NAME OF DOG \_\_\_\_\_

BREED OF DOG \_\_\_\_\_

AGE OF DOG \_\_\_\_\_ COLOR \_\_\_\_\_

### **FEES** (Please Circle Appropriate Fee)

**\$10.00** Male    **\$5.00** Neutered Male    **\$10.00** Female    **\$5.00** Spayed Female

*NOTE: A late fee of \$5 shall be assessed to the owner of each dog 5 months of age or older who fails to obtain a dog license by March 31 of the current year.*

Mail this **FORM, FEES, a SELF-ADDRESSED, STAMPED ENVELOPE** and **RABIES VACCINATION CERTIFICATE** (*which will be returned to you with the tag in the envelope you provide*) to:

Village of Hobart  
2990 S. Pine Tree Rd.  
Hobart, WI 54155

If you have any questions, please call the Village Business Office at 869-1011