

TOWN OF MERRIMAC

DOG LICENSE

THIS LICENSE EXPIRES MARCH 31, _____

Indicate License Needed

M = Male ____

F = Female ____

S = Spayed ____

N = Neutered ____

Date _____

Tag Number _____ (Will be filled in by Town Clerk)

Issued To: _____

Address _____

Telephone _____

Name of Dog _____ Color: _____

Breed: _____ Age _____ Vet _____

Rabies Vaccine Given _____ Expiration: _____

FEE: _____

LATE FEE: _____

Please print all of the above

The above form is provided for your convenience, simply fill out the form completely, using one form for each dog. Include a Valid Rabies Certificate with the proper fee or fees made payable to the Town of Merrimac and mail to Town Clerk, 2 School Street, Merrimac, MA 01860. (Include a self addressed stamped envelope for the return of the tag and license)