



500 E Main St. Duchesne, Utah 84021
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DOG LICENSE

Tag must remain on dog collar. You are authorized to keep said dog without further payment until Dog Tax for next fiscal year becomes due.

DATE _____ EXPIRES _____ LICENSE TAG # _____

OWNER INFORMATION

Name: _____
Home Address: _____
Home Telephone: _____ **Cell Phone:** _____

DOG INFORMATION

Name of Dog: _____

Markings: _____

Is the dog spayed or neutered? Yes _____ \$5 Fee No _____ \$10 Fee

What is the sex of the dog? Male _____ Female _____

What breed is the dog?

| | | |
|---------------|-----------------|-----------------|
| Boxer _____ | Bull _____ | Chihuahua _____ |
| Chow _____ | Collie _____ | Dachshund _____ |
| Lab _____ | Hound _____ | Pekingese _____ |
| Poodle _____ | Retriever _____ | Setter _____ |
| Shepard _____ | Spaniel _____ | Terrier _____ |

Other Breed: _____

Distemper Vaccination: _____ Date Rabies Vaccination: _____ Date Other: _____ Date

ACKNOWLEDGEMENT

I hereby acknowledge receipt of amount indicated below, being the amount due for a dog license for one dog as described above.

Amount Received: \$ _____

Received By: _____