



TOWN OF HILLSDALE
P.O. BOX 305
HILLSDALE, NY 12529

Phone: 518-325-5073
Email: towninfo@hillsdaleny.com
Hillsdaleny.com

APPLICATION FOR DOG LICENSE

Name of Owner: _____
If the owner is less than 18 years of age, the parent(s)/guardian shall be made the owner of record

Mailing Address: _____

Physical Address: _____

Phone: _____

DOG IDENTIFICATION

You need to have or email the sheet from the vet's office, stating that the dog is spayed/neutered and up to date on rabies shots, to the town clerk.

Name of Dog: _____ **Breed of Dog:** _____

Colors (Primary): _____

Markings: _____

Gender: _____ **Birth Year:** _____

FEES: Checks payable to Hillsdale Town Clerk

Spayed/Neutered	1 year \$11
Unspayed/Un-neutered	1 year \$18

DONATION TO CGHS: _____

YOU MUST COME IN AND SIGN THE PAPERWORK WITH THE TOWN CLERK'S OFFICE EITHER DURING BUSINESS HOURS OR BY APPOINTMENT.