YOUR DOGS VACCINATION MUST BE UP TO DATE TO USE THIS FORM

To license by mail fill out this form and mail it to:

City Hall Clerks Office
133 William Street
New Bedford, MA 02740

Your name _____

Address _____ Phone # _____

1) Dog's name _____ Breed _____ Sex _____

Age _____ Vet's name _____ Is your dog neutered/spayed? Y☐ N☐

2) Dog's name _____ Breed _____ Sex _____

Age _____ Vet's name _____ Is your dog neutered/spayed? Y☐ N☐

If you answered **"YES"** to your dog being spayed/neutered - send proof of surgery.

Have you ever licensed before? Yes☐ No☐ If **"YES"** answer questions below.

What was the last year your dog was licensed? _____

For the above year, whose name and address was the dog licensed under?

Name _____ Address _____

IMPORTANT

Information that must be submitted with this form:

1) Proof of surgery for each dog if it has been neutered or spayed.
2) Proof of rabies vaccination for each dog
   (any one of the following will be considered proof)
   a) Copy of rabies certificate
   b) A certified letter form a Veterinarian
   c) A Veterinarian's bill with the rabies information on it

Return this form with a check or money order made out to "City of New Bedford"

$20.00 for each dog **IF NOT** spayed or neutered.
$10.00 for each dog **IF** spayed or neutered.