NEW DOG LICENSE APPLICATION FORM

TOWN OF BALLSTON: P.O. BOX 67, BURNT HILLS, NEW YORK 12027

CAROL A. GUMIENNY, TOWN CLERK

PHONE: 518-490-2750 FAX: 518-884-2839 EMAIL: cgumienny@townofballstonny.org

OWNER NAME: _____

OWNER ADDRESS: _____

OWNER PHONE NUMBER: _____

OWNER EMAIL ADDRESS (IF APPLICABLE): _____

PET NAME: _____

BREED: _____

COLOR: _____

SEX: _____ NEUTERED/SPAYED: YES _____ NO _____

BIRTH YEAR: _____

NAME OF VETERINARIAN PRACTICE: _____

PLEASE PROVIDE THE ABOVE INFORMATION AND SUBMIT TO OUR OFFICE ALONG WITH:

1 - VETERINARIAN PROOF OF RABIES VACCINATION

2 – PAYMENT OF: $10 (NEUTERED/SPAYED) OR $17 (UNNEUTERED/UNSPAYED)

*** IF BY CHECK, PLEASE MAKE PAYABLE TO TOWN OF BALLSTON