

Town of Maryland

Office of the Town Clerk
PO Box 127
Schenevus, NY 12155
607-638-1924

New Dog License –

If licensing by mail, enclose a self-addressed stamped envelope for tag and receipt.

Month of Licensing:

Name and Address:

Please enter information: provide proof of Rabies, spay or neuter status

Spayed Female (SF): \$3.50
Neutered Male (NM): \$3.50
Intact Female (F): \$16.50
Intact Male (M): \$16.50
Replace Lost Tag: \$3.00
After 60 days add \$2 late fee per month.

Dog's Name:

License Number: clerk will provide

Spay or Neuter Status:

Rabies Vac issued:

Rabies Vac expire:

Year of Birth:

Breed:

Color:

ENTER AMOUNT DUE:

Owner keep top portion for your records

-----**CUT HERE**-----

Clerk's Copy

Dog Owner's Name:

Address:

Make check payable and mail to:
Maryland Town Clerk
PO Box 127
Schenevus, NY 12155
607-638-1924

Please enter information:

Phone number: _____

Dog's Name: _____

License Number: _____

Spay or Neuter Status: _____

Rabies Vac issued: _____

Rabies Vac expire: _____

Year of Birth: _____

Breed: _____

Color: _____

Date paid: _____

Cash/Check #: _____

ENTER AMOUNT PAID:

Clerk's signature _____