

PET LICENSE

Subject to Wisconsin Statue Chapter 174

Village of Reedsville

Manitowoc County

Owner(s) Name: _____

Address: _____

Phone Number: _____

Dog: Cat:

Pet Name: _____

Breed: _____

Sex Type: Male Neutered Male Female Spayed Female

Color: _____

Veterinarian: _____

Rabies Vaccination Date: _____

Rabies Vaccination Expiration Date: _____

Vaccination MFR: _____

Vaccination Serial #: _____

I certify that all statements on this form are true and correct. If I have provided false information I may be subject to fine or imprisonment under State law.

Signature of Owner Date

Fees: Neutered Males & Spayed Females	\$5.00 each pet
Male or Female	\$10.00 each pet

After April 1 st	
Neutered Males & Spayed Females	\$20.00 each pet
Male or Female	\$25.00 each pet