

Fill out on your computer and print Mail or bring in to Town Clerk's office

TOWN OF WESTPORT

110 MYRTLE AVENUE WESTPORT CT 06880 203-341-1110

APPLICATION FOR A DOG LICENSE

Dog	g Name:	Dog Breed:
Dog	g Age:	Dog Color:
		OWNER'S INFORMATION
Owı	ner:	
Owı	ner's Address:	
	u may bring the application can send it to us by mail.	a, supporting material and a check for the fee to the Town Clerk's office or
MA	TERIAL REQUIRED:	
	Filled out application	
	A copy of the Rabies Certificate with Expiration Date	
	A copy of a Spay/Neuter certificate (required if the dog has been altered)	
	A check for the fee, paya	ble to the Town of Westport. See correct amount below.
		\$8/year, neutered or spayed \$19/year, non-neutered or non-spayed \$51/year, 10-dog kennel
	Self-addressed stamped 1	eturn envelope

The certificates will be returned when we mail you the license. We do not keep them.