



Dog License Application

Owner's Name _____

Street Address _____

Phone _____ Email _____

Are there any dog(s) you have licensed within the last year that are no longer in the household? Yes or No
 If yes, please provide the dog(s) name(s) _____

	DOG 1	DOG 2	DOG 3
Dog's Name			
Color			
Breed			
Sex (select one)			
Male \$20.00			
Neutered Male \$10.00			
Female \$20.00			
Spayed Female \$10.00			
PROOF OF RABIES VACCINATION IS REQUIRED BEFORE LICENSE IS ISSUED			
FOR OFFICE USE ONLY			
Rabies Serial Number			
Rabies Mfg Name			
Rabies Date Given			
Rabies Date Expires			
Veterinary Clinic			
Dog Tag Number			

Owner's Signature _____ Date _____

Total Paid (Cash/Check): \$_____

The license year is January 1 through December 31. A \$5.00 penalty per dog will be assessed after April 1st

Please complete form, sign, and return
 this form along with the appropriate fees and proof of rabies to:
 City of Hudson
 505 3rd St
 Hudson, WI 54016

Chapter 174 Wisconsin Statutes requires all dogs five months or older be licensed.

City of Hudson Municipal Code Chapter 99-5, No cat, dog, or domesticated animal shall be permitted to run at large within the City of Hudson. The owners of an animal shall promptly remove and dispose in a sanitary manner any excreta deposited by such animals upon any public or private property.