



Township of East Garafraxa
 065371 Dufferin County Road 3, Unit 2
 East Garafraxa ON L9W 7J8
 Phone: 226-259-9400
 Toll Free: 877-868-5967
 Fax: 1-226-212-9812
 Email: info@eastgarafraxa.ca

Application for Dog License(s)

Owner Details

Owner Name:			
Property Address:			
Mailing Address: (if different from property address)			
Phone Number:		Email:	

Are you a tenant on the property?

Please note: Invoice and tag(s) will be mailed directly to tenants

Yes

No

Animal Details

#1

Name:			<p>Important Information</p> <ul style="list-style-type: none"> Licenses are issued annually It is the owner's responsibility to notify the Township office of any changes to existing license(s) or to register a new dog(s) No owner shall permit or cause to be permitted a dog or dogs to run at large in the municipality <p>Fees as per By-law 2-95 (click on the by-law to go to copy on the website)</p>
Breed:			
Age:			
Colour:			
Gender:	<input type="radio"/> Male	<input type="radio"/> Female	
Neutered/Spayed:	<input type="radio"/> Yes	<input type="radio"/> No	

#2

Name:			<p>Important Information</p> <ul style="list-style-type: none"> Licenses are issued annually It is the owner's responsibility to notify the Township office of any changes to existing license(s) or to register a new dog(s) No owner shall permit or cause to be permitted a dog or dogs to run at large in the municipality <p>Fees as per By-law 2-95 (click on the by-law to go to copy on the website)</p>
Breed:			
Age:			
Colour:			
Gender:	<input type="radio"/> Male	<input type="radio"/> Female	
Neutered/Spayed:	<input type="radio"/> Yes	<input type="radio"/> No	

#3

Name:			<p>Important Information</p> <ul style="list-style-type: none"> Licenses are issued annually It is the owner's responsibility to notify the Township office of any changes to existing license(s) or to register a new dog(s) No owner shall permit or cause to be permitted a dog or dogs to run at large in the municipality <p>Fees as per By-law 2-95 (click on the by-law to go to copy on the website)</p>
Breed:			
Age:			
Colour:			
Gender:	<input type="radio"/> Male	<input type="radio"/> Female	
Neutered/Spayed:	<input type="radio"/> Yes	<input type="radio"/> No	

Office Use

Date Received:		License Number(s) Issued:	
A/R Number Issued:	N/A	Invoice Number:	