



# THE CORPORATION OF THE TOWNSHIP OF ADJALA-TOSORONTIO

7855 Sideroad 30 Adjala, Alliston, Ontario. L9R 1V1  
Telephone: 705-434-5055 Fax: 705-434-5051

## 2018 DOG TAG LICENCE APPLICATION

### FEES PURSUANT TO FEES BYLAW 16-36

RATES	NEUTERED/SPAYED	INTACT
Prior to and including March 31 <sup>st</sup> per dog	\$22.00	\$35.00
As of April 1 <sup>st</sup> to December 31 <sup>st</sup>	\$40.00	\$50.00
Replacement Tag	\$0.50	\$0.50
*Annual Fee for Licensing Dangerous Dogs *Rabies vaccination is required	\$150.00	\$250.00

- Prior to April 1<sup>st</sup>, a \$5.00 discount PER PROPERTY is available when purchasing dog tags in person at the Municipal Office or by mail.
- If registering by mail, please submit; a completed application form, self-addressed stamped envelope (\$1.80); and cheque or money order. Do not send cash in the mail.

### DOG OWNER INFORMATION

Name of Owner(s):

Civic Address:

City: \_\_\_\_\_ ON \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### FIRST DOG

Name of Dog:

Male or Female: M / F      Neutered or Spayed: YES / NO      Age: \_\_\_\_\_

Breed: \_\_\_\_\_      Colour: \_\_\_\_\_      Dog Tag #: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

### SECOND DOG

Name of Dog:

Male or Female: M / F      Neutered or Spayed: YES / NO      Age: \_\_\_\_\_

Breed: \_\_\_\_\_      Colour: \_\_\_\_\_      Dog Tag #: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

### THIRD DOG

Name of Dog:

Male or Female: M / F      Neutered or Spayed: YES / NO      Age: \_\_\_\_\_

Breed: \_\_\_\_\_      Colour: \_\_\_\_\_      Dog Tag #: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

### PAYMENT

- A maximum of three dogs permitted per household
- Assistance Dogs and Livestock Protection Dogs are exempt from licence fees
- A new dog owner has 30 days to register their new dog

Sub-total

Discount:

Total Due:

### ALLISTON & DISTRICT HUMANE SOCIETY (ADHS)

If your dog has been picked up by Canine Control and you would like to retrieve your dog, please call the Alliston & District Humane Society at (705) 321-2378 to book an appointment. ADHS handling fees apply. ADHS accepts CASH ONLY.

### SIGNATURE

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_