



# TOWN OF ROXBURY CONNECTICUT

Office of the Town Clerk

29 North Street • P.O. Box 203 • Roxbury, CT 06783-0203

## DOG LICENSE APPLICATION

Name	
Street Address	
Mailing Address (If different from street address)	
Telephone Number	Email Address
Dog's Name	
Predominant Breed	
Color	Dog's Date of Birth

### FEE SCHEDULE (Please check one)

- ☐ Male \$ 19.00
- ☐ Female \$ 19.00
- ☐ Male / Neutered \$ 8.00
- ☐ Female / Spayed \$ 8.00

### LATE FEE

\$1 per month starting July 2024

Please provide a copy of the following with this application:

- ☐ Rabies Vaccination Certificate
- ☐ Spay / Neuter Certificate (if applicable)

Present this application to the Town Clerk or mail application, proper certificate(s) & payment to:

Town Clerk's Office, 29 North St, Roxbury, CT 06783

Applications mailed to the Town Clerk's office must include a self-addressed stamped envelope.