



**DEPARTMENT OF LICENSING, INSPECTIONS AND PERMITS**

CITY HALL • 340 NORTH WASHINGTON AVENUE • SCRANTON, PENNSYLVANIA 18503 • PHONE: 570-348-4193 • FAX: 570-348-4171

**DOG LICENSE**

**MAKE CHECKS PAYABLE TO THE CITY OF SCRANTON**

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

**FEE: \$20.00**

OWNER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

DOG'S NAME \_\_\_\_\_ BREED \_\_\_\_\_ SEX \_\_\_\_\_

COLOR \_\_\_\_\_ AGE \_\_\_\_\_

**MEDICAL INFORMATION**

DATE OF RABIES VACCINATION \_\_\_\_/\_\_\_\_/\_\_\_\_

EXPIRES \_\_\_\_/\_\_\_\_/\_\_\_\_ TAG# \_\_\_\_\_

VET'S NAME AND CLINIC \_\_\_\_\_

**OFFICIAL USE ONLY**

IN ACCORDANCE WITH FILE OF COUNCIL #177 OF 1994

TAG NUMBER \_\_\_\_\_ EXPIRES ON APRIL 30, 20\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_