

**NEW YORK STATE DEPARTMENT OF AGRICULTURE AND MARKETS  
TOWN OF BEDFORD DOG LICENSE APPLICATION**

<input type="checkbox"/> New License	<input type="checkbox"/> Renewal Indicate License #:	<input type="checkbox"/> Cancellation- Indicate Reason:
Last name:		First:
Middle:		
Street Address:		Phone #:
City:		State: Zip Code:
Name of Dog:		Year of Birth:
Breed:		Color(s):
Markings:		Tattoo or chip:
<b>Required: Enclose a copy of Rabies Certificate</b>	Date Vaccinated:	Vaccination: <input type="checkbox"/> One-Year <input type="checkbox"/> Three-Year
Veterinary Hospital:		
<p align="center"><b>Check appropriate box</b></p> <p align="center"><b>Fee</b></p> <p><input type="checkbox"/> Male, Neutered . . . . \$ 12.50</p> <p><input type="checkbox"/> Female, Spayed . . . . \$ 12.50</p> <p><u>Male – Unneutered:</u></p> <p><input type="checkbox"/> under 4 months . . . . \$17.50</p> <p><input type="checkbox"/> 4 months &amp; over . . . . \$20.50</p> <p><u>Female – Unspayed:</u></p> <p><input type="checkbox"/> under 4 months . . . . \$17.50</p> <p><input type="checkbox"/> 4 months &amp; over . . . . \$20.50</p> <p>Exemption – <b>No Fee</b> (Guide, War, Police, Hearing, Service Dogs)</p>	<p align="center"><b>Instructions</b></p> <p>Include:</p> <ol style="list-style-type: none"> <li>1. This completed form</li> <li>2. Rabies Certificate from veterinarian</li> <li>3. Appropriate fee (listed at left) (make check payable: Town of Bedford)</li> </ol> <p>Mail or Bring ALL to:      Town Clerk    Town of Bedford    321 Bedford Road    Bedford Hills, NY 10507</p> <p>(Note: <u>if by mail</u>: include self-addressed, stamped envelope. When completed, your license and rabies certificate will be mailed to you)</p> <p>Questions or additional information, Call <b>914-666-4534</b></p>	
Owner's Signature:		Clerk's Signature:
Date:		Date: