

THE CORPORATION OF THE TOWNSHIP OF BLACK RIVER-MATHESON



DOG TAG APPLICATION

Please complete the following information to ensure our records reflect accurate details about your pet(s) and return this application along with your fee.

Date: _____

Name: _____		Address: _____	
First and Last Name		Box No. , 911 No.	
_____		_____	
Town	Province	Postal Code	
_____		_____	
(_____)		(_____)	
Home Phone		Business Phone	

E-mail address			

	First Dog	Second Dog	Third Dog
Dog' Name			
Breed			
Female/Male			
Spayed/Neutered			
Colour			
Age			
Amount Due			

TOTAL - \$ _____

For additional dogs, use reverse side of this form.

Dog Tag Fee: \$20.00
Replacement for lost tag - **\$5.00**

Please attend our office along with this application form to:

Township of Black River-Matheson
429 Park Lane
Matheson, Ontario
P0K 1N0

NOTICE: Dog Tags expire December 31st of each year.

Failure to procure a tag will result in fines being charged under By-law 2005-26 and the Provincial Offences Act.