



Town of Islip

Linda D. Vavricka
Town Clerk and Registrar of Vital Statistics
655 Main St., Islip NY 11751

Exempt Dog License Application



Owner Identification (Any person who harbors or feeds the dog)

Owner's Name _____ Phone _____

Address _____
Street City State Zip

Owner Email _____

Dog Identification

Dog's Name _____ Breed _____

Primary Color _____ Secondary Color _____

Year of Birth _____ Sex Female Male

Type of License

Exempt Dogs.....NO FEE

Guide, Service, Police, Detection, Working, Search, Hearing or under 4 months old

Is this a New Application, Renewal or Replacement Tag or is dog deceased, lost or have a new owner?

The original ID Tag I have the original tag

Has been lost

No longer usable and has been returned to the clerk

Replacement of original ID Tag number _____

Signature of Owner _____ Date _____

Message _____



NOTE Please attach the following forms (CLICK submit and sign, you will be prompted to add attachment(s))

- A Valid Rabies Certificate (if applicable)
- A Spayed/Neutered Certificate (if applicable)
- Exempt/Service Dog Certificate (Required for New Applications)