

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

Dog License Application (



0,000000 **W** Owner Identification (Any person who harbors or feeds the dog) Owner's Name ______ Phone _____ Address _____ Street City Zip Owner Email _____ **Dog Identification** Dog's Name Breed

Primary Color _____

Sex Female W Male W (choose one)

Secondary Color _____

Type of License

Year of Birth _____

Is this a New Application, Renewal or Replacement Tag? (Click for options)

Estimated Total Including 2.99% Convenience Fee \$



The original ID Tag I have the original tag

Has been lost

No longer usable and has been returned to the clerk

New application

Replacement of original ID Tag number ______



YES _____ I understand and agree that a 2.99% credit card convenience fee will be added at transaction settlement time

Signature of Owner ______ Date _____

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

- A Valid Rabies Certificate (Required)
- A Spayed/Neutered Certificate (if applicable)
- *Please submit this form with your payment online mailing the form will delay processing*