

## Town of New Castle PO Box 90

450 W. Main Street New Castle, CO 81647

## **Administration Department**

(970) 984-2311 Fax: (970) 984-2716 www.newcastlecolorado.org

## **2024 DOG LICENSE REGISTRATION**

Include: Pet Photo  Rabies Certificate	Old records get recycled, so please include a photo
☐ License Fee	of your dog(s) and a copy of their rabies certificate(
OWNER'S INFORMATION	with your completed form
Owner's Name:	
Mailing Address:	
Physical Address:	
Phone Number(s):	
Email Address:	
DOG'S INFORMATION	
Dog's Name:	
Breed:	
Color/Markings:	
Age:	
Microchip Number:	
VETERINARIAN'S INFORMATION	
Vet's Name:	
Vet's Address:	
Vet's Phone Number:	
Dog's Rabies Tag Number:	
Dog's Rabies Vaccination Date:	Rabies Expiration Date:
LICENSE FEE	
Please select:	
☐ Male, Neutered (\$20.00)	☐ Male, Unneutered (\$35.00)
☐ Female, Spayed (\$20.00)	Female, Unspayed (\$35.00)

Please mail this form to Town Hall or drop off with a copy of your **dog's rabies certificate and photo**. Your new license tag will be mailed to you. Please allow for processing time.