



# COUNTY of FREDERICK

Office of Treasurer

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Deputy Treasurer

## Dog License Application

Owner name(s) \_\_\_\_\_

Owner Address \_\_\_\_\_  
\_\_\_\_\_

Owner Phone # \_\_\_\_\_

-----Pet Information-----

Dog's name \_\_\_\_\_ Breed \_\_\_\_\_

Color \_\_\_\_\_ Sex (M/F/N/S) \_\_\_\_\_

Date of birth \_\_\_\_\_ Rabies expiration date \_\_\_\_\_

**Please circle the tag you wish to purchase:**

Dog is spayed or neutered	TYPE	Price
YES	Lifetime tag	10.00
NO	Lifetime tag	15.00
YES	1-year tag	5.00
NO	1-year tag	10.00

By returning this document, you are verifying that the information contained herein is correct and true