

# TOWN OF MEDINA APPLICATION FOR DOG LICENSE

All dogs five months or older must be licensed and have current rabies vaccination as required by State Law. Dogs must be licensed by May 1<sup>st</sup>; a \$20.00 late fee per dog per month or part of month will be assessed if not licensed by May 1<sup>st</sup> of the current year. Failure to have a current license for your dog may result in significant fines and penalties. **IF YOU HAVE RENTERS, PLEASE BE SURE THAT YOU NOTIFY THEM OF THESE LICENSING REQUIREMENTS.**

Licensing Fees per dog are: \$15.00 if spayed or neutered \$20.00 if not spayed or neutered  
A Kennel License \$55.00 up to 12 dogs and \$15.00 per dog after 12 dogs

Please provide the following information and return it to the town with your check payable to the Town of Medina.  
**Payment for your dog license should not be included in your property tax payment. Mail to Treasurer, 4996 Tower Line Road, Marshall, WI 53559**

**A current rabies certificate from your veterinarian must be supplied if the date is expired or for new dog licenses.**

The following is a list of the information we have on file for your prior licensing:

Owner Name:  
Owner Address:  
Phone Number: \_\_\_\_\_

Dog Name:  
Color:                                      Neutered    Male    Spayed    Female  
Breed:                                       Rabies Exp:

LIC # \_\_\_\_\_ assigned by treasurer.

## NEW DOG APPLICATION

Please Circle:

Dog Name: \_\_\_\_\_                      Neutered       Spayed       Male       Female  
Color: \_\_\_\_\_                              Rabies Exp: \_\_\_\_\_  
Breed: \_\_\_\_\_                              LIC # \_\_\_\_\_ assigned by treasurer.

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## TOWN OF MEDINA DANE COUNTY WISCONSIN DOG LICENSE RECEIPT

The required fee of \$ \_\_\_\_\_ having been paid to the undersigned treasurer is assigned the license number \_\_\_\_\_. The license is valid from January 1, 2022 until December 31, 2022 for the owner identified below to keep the dog listed below within the boundaries of the Town of Medina.

Owner Name:  
Owner Address:  
Phone Number: \_\_\_\_\_

Dog Name:  
Color:                                      Neutered    Male    Spayed    Female  
Breed:                                       Rabies Exp:

Received By: \_\_\_\_\_ on \_\_\_\_\_.