



CITY OF RHINELANDER
Application for Dog/Cat License

Date: _____

Owner's Name _____

Owner's Address _____

City/Zip Code & Phone # _____

Name of Dog/Cat _____

Sex (Please Check) Male Neutered Male Female Spayed Female

Breed _____ Age _____ Color _____

FEES: (Please Check Appropriate Fee)

\$15.00 Male \$5.00 Neutered Male
 \$15.00 Female \$5.00 Spayed Female

PENALTIES: *A late fee of \$5.00 shall be assessed against an owner who fails to obtain a license by April 1st of each year for each dog 5 months of age or older (subject to the provisions of Ch. 174, Wis. Stats., and such provisions and regulations as may be imposed by the State of Wisconsin at any time)*

THE FOLLOWING INFORMATION IS REQUIRED.

LICENSE WILL NOT BE ISSUED IF THIS INFORMATION IS NOT PROVIDED

The above dog/cat was vaccinated against rabies on _____ 20_____

Veterinarian _____ Vaccine Manufacturer/Producer _____

Vaccine Serial No. _____ Vaccine Expiration Date _____ 20_____

Owner's Signature _____ Date _____

Return with appropriate fee and self-addressed stamped envelope to:

City Clerk's Office
135 South Stevens Street * Rhinelander, WI 54501
715-365-8600 * clerk@rhinelanderwi.us * Rev 03/22