

**Dog and Cat Owners License Application**

**Village of Spring Valley**

E121 South 2<sup>nd</sup> St., P.O. Box 276  
Spring Valley, WI 54767

**2020**

**For office receipt use only**

License # \_\_\_\_\_

Cash Check # \_\_\_\_\_

Amt paid \$ \_\_\_\_\_

Date \_\_\_\_\_

**We need to see a rabies vaccination certificate only if your previous rabies shots have expired so we can update records. Your pet is not considered registered until we have up-to-date rabies vaccination information.**

**\*\*\*PROPERTY OWNERS WITH RENTAL PROPERTY PLEASE PASS THIS INFORMATION ON TO YOUR RENTERS\*\*\***

The Village of Spring Valley requires all dogs and cats kept within the Village to be licensed. Dog and cat licenses are due and payable on or before **April 1<sup>st</sup>** of each year. State Statute Chapter 174.07(1)(a) and VSV Ordinance 6-3(a)(2) requires the owner of dogs (and cats for village) more than 5 months of age to obtain a license annually on or before April 1<sup>st</sup> or on the date the dog or cat becomes 5 months of age.

<b>Fees</b>	
\$20.00 - Neutered/spayed dog/cat	
\$30.00 Intact Male/Female	
\$5.00 Penalty added after April 1st	

Owner's Name \_\_\_\_\_

Property Owner's Name \_\_\_\_\_  
(if renter is licensing the pet)

Street Address \_\_\_\_\_

Phone number \_\_\_\_\_

Pet's Name \_\_\_\_\_ Cat Dog Male Female Spayed/Neutered Yes No

Color \_\_\_\_\_ Breed \_\_\_\_\_

**Date of rabies vaccination** \_\_\_\_\_ **Expires** \_\_\_\_\_

I, the undersigned, do hereby certify that the above-named dog/cat has had the current rabies vaccination and has been spayed or neutered (or not) as above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Failure to license your pet will result in a fine by the local Police Department**  
***Vaccination clinic dates and information are on the back of this form (discounted prices)***

IF YOU NO LONGER OWN A DOG OR CAT, PLEASE COMPLETE THE FOLLOWING FORM AND RETURN IT TO THE VILLAGE OFFICE TO AVOID A TICKET FOR NON-REGISTRATION. WE WILL REMOVE YOUR INFORMATION FROM OUR LISTING.

PET OWNER'S NAME: \_\_\_\_\_

PET OWNER'S ADDRESS \_\_\_\_\_

PET'S NAME: \_\_\_\_\_

PHONE NUMBER IN CASE WE NEED TO CONTACT YOU: \_\_\_\_\_