

Town of Cuba Application for Dog License

Name: _____

Address: _____

Phone: _____

Dog Name: _____

Breed: _____

Color: _____

Gender: _____

Year of Birth: _____

Owner Signature: _____ Date: _____

You will need the following paperwork to obtain a license:

*Proof of current rabies vaccination-signed certificate from veterinarian

*Proof of being spayed/neutered if applicable

*Check made payable to Cuba Town Clerk

Phone 585-968-8113

Hours: Tue-Thurs. 8am-12pm

OR

Mail this form with all required paperwork, a self-addressed, stamped envelope, check for \$10.00 for altered dog or \$18.00 for unaltered dog to:

Cuba Town Clerk

15 Water Street

Cuba, NY 14727

All certificates submitted will be returned with the approved license.