



TOWN WHERE A U.S. FLAG WAS FIRST  
RAISED OVER A PUBLIC SCHOOL. MAY, 1812

# Town of Colrain Massachusetts

55 Main Road  
Colrain, MA 01340  
townclerk@colrain-ma.gov  
Tel 413-624-7100  
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## Office of the Town Clerk

### New Dog License Application

Massachusetts State Law requires all dogs that reach 6 months of age to be licensed and vaccinated annually.

#### License Fees:

Neutered/Spayed: \$5.00

Dogs not neutered/spayed: \$10.00

\*Late fee of \$10.00 per dog after March 31<sup>st</sup> in addition to the cost of each license.

\*Late fee of \$25.00 per dog after May 15<sup>th</sup> in addition to the cost of each license.

Include the following with this application:

1. Cash or check made payable to the Town of Colrain
2. A self-addressed stamped envelope (if you would like license mailed to you)
3. A copy of each dog(s) valid rabies certificate
4. Proof of spayed/neutered (if applicable)

### PRIMARY DOG OWNER INFORMATION

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Over 70 years old (as of 12/31)?  Yes  No

Residential Address: \_\_\_\_\_ PO BOX: \_\_\_\_\_

*No licensing fee will be assessed for any dog(s) owned by individuals ages 70 or older, as of December 31<sup>st</sup> of this year. Proof of age, such as a copy of a Driver's License or Birth Certificate may be requested.*

Dog #1 Name: _____		Breed: _____	
Color: _____	Age: _____	Male	Female
Spayed or Neutered?	Yes	No	Rabies Expiration: _____
Name of Vet: _____			

Dog #2 Name: _____		Breed: _____	
Color: _____	Age: _____	Male	Female
Spayed or Neutered?	Yes	No	Rabies Expiration: _____
Name of Vet: _____			

Dog #3 Name: _____		Breed: _____	
Color: _____	Age: _____	Male	Female
Spayed or Neutered?	Yes	No	Rabies Expiration: _____
Name of Vet: _____			