

Kimberly A. Burst
Cheektowaga Town Clerk

Town Hall, 3301 Broadway Street
Cheektowaga, New York
14227-1088 Website:

www.tocny.org

townclerkwebmail@tocny.org



Aaron Kandefer
Cheektowaga Dog Warden
AKandefer@cpdny.org
Animal Control Phone Number:
(716) 686-3525

IF YOU LOVE ME, THEN LICENSE ME!

According to New York State Law: Every dog over four months of age, owned or harbored in New York State for longer than 30 days, must be licensed and have current rabies.

Instructions for Applying for Dog License:

Complete the attached form. Then remit to the Town Clerk's Office, either in person or by mail, including the following:

- The completed application form
- Spay/Neuter certificate (if applicable)
- Proof of rabies vaccination signed by a licensed veterinarian
- Fee: \$20.50 Unaltered/Intact
\$13.50 Spayed/Neutered
\$15.50 Senior Owner (65 years or Older) Unaltered/Intact
\$8.50 Senior Owner (65 years or Older) Spayed/Neutered

If applicable, proof of exemption status.

For further information, email townclerkwebmail@tocny.org or call (716) 686-3423 or 3983.

Monday – Friday, 9:00 AM to 4:30 PM

In the event that your dog is lost or stolen, having a License tag will enable the Cheektowaga Animal Control Office to retrieve the owner's information and contact you.

A License is a ...



Lost dog's ticket home.

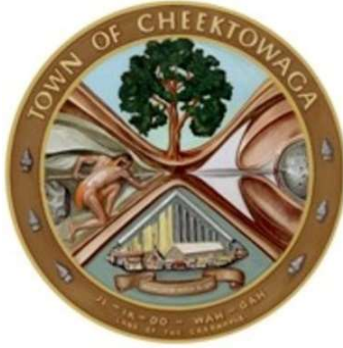
DOG IDENTIFICATION

RABIES CERTIFICATE REQUIRED & will need to be supplied/submitted when licensing
 Rabies Vaccine: _____
 Manufacturer Serial Number: _____

Vaccination

One Year Three Year

Date Vaccinated: _____
 Veterinarian: _____



| | |
|-------------------------------|------------------------|
| CHEEKTOWAGA License No. _____ | |
| Date Issues: _____ | Expiration Date: _____ |
| Dog Color(s): _____ | Markings: _____ |
| Dog's Yr. of Birth: _____ | |
| (2 Digits Month & Yr) | |
| Dog's Name: _____ | |

New York State Department of Agriculture and Markets Division of Animal Industry
 1 Winners Circle - Albany, New York 12235 518-457-2728

CHEEKTOWAGA DOG LICENSE FORM

Erie County, Town of Cheektowaga Issuing License

| | | | | | | | | |
|---|-----------------------------------|----------------------------------|---|------------|-----------|-----------|-----------------|-----------|
| LICENSE TYPE: | <input type="checkbox"/> ORIGINAL | <input type="checkbox"/> RENEWAL | OWNER'S PHONE NO. | _____ | | | | |
| Owner Identification (Person who harbors or keeps dog): Last, First Middle Initial | | | | | | | | |
| _____ | | | | | | | | |
| Mailing Address: House No. Street or R.D. No. and P.O. Box No. | | | | | | | | |
| _____ | | | | | | | | |
| City | | | State | Zip | | | | |
| _____ | | | _____ | _____ | | | | |
| County | | | Town, City or Village | | | | | |
| _____ | | | _____ | | | | | |
| TYPE OF DOG LICENSE FEES <input type="checkbox"/> Unaltered/Intact (65 yr old or older) \$15.50 <input type="checkbox"/> Neutered/Spayed Senior (65 yr old or older) \$8.50 <input type="checkbox"/> Unaltered/Intact \$20.50 <input type="checkbox"/> Neutered/Spayed \$13.50 | | | <table border="1"> <tr> <td>STATE FEE</td> <td>LOCAL FEE</td> </tr> <tr> <td>SPAY/NEUTER FEE</td> <td>TOTAL FEE</td> </tr> </table> | | STATE FEE | LOCAL FEE | SPAY/NEUTER FEE | TOTAL FEE |
| STATE FEE | LOCAL FEE | | | | | | | |
| SPAY/NEUTER FEE | TOTAL FEE | | | | | | | |
| IS OWNER LESS THAN 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | |
| IF YES, PARENT OR GUARDIAN SHALL BE DEEMED THE OWNER OF RECORD AND THE INFORMATION MUST BE COMPLETED BY THEM. | | | | | | | | |

Mail all documents and Dog Licensing Form to:

Town of Cheektowaga
 3301 Broadway, Room 101
 Cheektowaga, NY 14227