



PO Box 189
 Blue Mounds, WI 53517
 608.437.5197 ext. 1

Name:					
Address:					
Phone Number:				CHIP:	
Dog's Name:		Color:		Breed:	
Check One					
Spayed Female	Neutered Male	Un-Spayed Female	Un-Neutered Male	S/N Puppy 5 mo old by 7-1	UnS/UnN Puppy 5 mo old by 7-1
\$15.25	\$15.25	\$20.25	\$20.25	\$13.75	\$16.25
Rabies Vaccination Information					
Veterinarian:					
Vaccination Date:			Expiration Date:		
Vaccine Manufacture:			Vaccine Serial:		

Notice to Dog Owners:

Wis. Stats 95.21(2) RABIES VACCINATION REQUIREMENT FOR DOGS. (a) The owner of a dog shall have the dog vaccinated against rabies by a veterinarian within 30 days after the dog reaches 4 months of age and revaccinated within one year after the initial vaccination. The owner of a dog shall have the dog revaccinated against rabies by a veterinarian before the date the immunization expires as stated on the certificate of vaccination or, if no date is specified, within 3 years after previous vaccination.

Wis. Stats. 95.21(10) PENALTIES. (a) Failure to obtain rabies vaccination. An owner who fails to have a dog vaccinated against rabies as required under sub. (2)(a) may be required to forfeit not less than \$50 nor more than \$100.

Affidavit of Death or Disposal of Dog

If you no longer have your dog, please fill out the above information marked with a (*) and the following information and return to the Village Clerk. This information is needed in order to remove the dog from the system.

I hereby certify that the following dog: _____

Date Died: _____

Date Sold/Given Away: _____

 Signature

 Date