

2012 PET APPLICATION

03/21/2012

Licenses are Due Annually by the 31st of January.

TOWN OF FOREST

Tag #: _____
Date Issued: *****
Expires On: _____
Batch #: * FOR OFFICE USE ONLY *
Fee: _____
Penalty: _____
Invoice #: *****

**For change of ownership, address,
or death of a pet, notify:**
MUNICIPALITY TREASURER
NIKKI SUNDAY 715-263-3750
2839 COUNTY ROAD Q
CLEAR LAKE, WI 54005

Name: _____
Type: _____
Sex: _____
Spay/Neuter: _____
Breed: _____
Color: _____

----- Rabies Vaccination Data -----
Number: *****
Date: * Please present a *
Expires: * signed Rabies *
Clinic: * Vaccination Card *
Certification: *****

Property Address: _____

Owner on Record:

Responsible Party
Driver Lic. #: _____
Birth Date: _____
Phone #: _____

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