



Blanket License Number: \_\_\_\_\_

**DOCUMENTATION REQUIREMENTS**

- ▶ CHECK or MONEY ORDER payable to BENTON COUNTY
- ▶ Attach copies of your dogs' current RABIES CERTIFICATES / PROOF OF VACCINATIONS

**PLEASE NOTE**

Proof of subsequent vaccinations must be received in our office within 30 days in order to maintain a current license for that dog.

<b>Multiple Dog License, 5 or More Dogs</b>	
<input type="checkbox"/> \$100 One Year	<input type="checkbox"/> \$10 Late Fee (Over 30 days past due)
<input type="checkbox"/> \$175 Two Years	<b>Total Amount Due:</b>
<input type="checkbox"/> \$240 Three Years	

<b>Owner Information</b>		
Name:		Date (MM/DD/YYYY):
Residence Address:		
Location of Residence: <input type="checkbox"/> City of Corvallis <input type="checkbox"/> Outside City of Corvallis		
Mailing Address:		
Cell Phone:	Home Phone:	Work Phone:
E-Mail:		

<b>Information - Dog #1</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: (MM/DD/YYYY) _____
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #2</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: (MM/DD/YYYY) _____
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #3</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: (MM/DD/YYYY) _____
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #4</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #5</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #6</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #7</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #8</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #9</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.

<b>Information - Dog #10</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered
Name:	<input type="checkbox"/> New License
Breed:	<input type="checkbox"/> Renewal <input type="checkbox"/> License tag lost, replacement needed
Color:	Rabies Expiration: _____ (MM/DD/YYYY)
License Number:	Rabies certificate is required and must be valid into the final year of the licensing period.