

**STATE OF WISCONSIN, WASHINGTON COUNTY  
TOWN OF BARTON DOG LICENSE APPLICATION**

<b>OFFICE USE</b>	Paid with taxes <input type="checkbox"/>
<input type="checkbox"/> Cash	<input type="checkbox"/> Check # _____

Every person who owns, harbors or keeps a dog that is more than five months old in the Town of Barton must license the dog(s).

**NOTE: IF THE DOG NO LONGER LIVES IN THE TOWN OF BARTON, COMPLETE AFFIDAVIT ON THE BACK SIDE OF FORM**

Owner(s)/Keeper(s) of dog(s): \_\_\_\_\_ ( )  
Last Name
First Name
Phone Number (REQUIRED)

Address \_\_\_\_\_  
Street
City
Zip Code

Indicate change of ownership Yes  No  If yes, previous owner(s): \_\_\_\_\_

**I certify that the attached rabies information is true and correct (signature required to issue license)**

Dog owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTACH A COPY OF RABIES CERTIFICATE FOR EACH DOG**

**Wis Stats. §174.07 requires that a copy MUST BE provided each year, even if the information has not changed**

<b>DOG #1</b>	<input type="checkbox"/> New	Name _____	Birth Date _____
<input type="checkbox"/> Renewal	Breed _____	Color _____	Microchip _____
Veterinary Name/Clinic: _____		Vet Phone Number: ( ) _____	
<b>Rabies Info:</b>	Mfr: _____	Lot/Serial No: _____	Tag No: _____ Expiration: _____
<b>Type of Dog:</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Spayed/Neutered \$7.00 <input type="checkbox"/> Not Spayed/Neutered \$12.00

<b>DOG #2</b>	<input type="checkbox"/> New	Name _____	Birth Date _____
<input type="checkbox"/> Renewal	Breed _____	Color _____	Microchip _____
Veterinary Name/Clinic: _____		Vet Phone Number: ( ) _____	
<b>Rabies Info:</b>	Mfr: _____	Lot/Serial No: _____	Tag No: _____ Expiration: _____
<b>Type of Dog:</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Spayed/Neutered \$7.00 <input type="checkbox"/> Not Spayed/Neutered \$12.00

<b>DOG #3</b>	<input type="checkbox"/> New	Name _____	Birth Date _____
<input type="checkbox"/> Renewal	Breed _____	Color _____	Microchip _____
Veterinary Name/Clinic: _____		Vet Phone Number: ( ) _____	
<b>Rabies Info:</b>	Mfr: _____	Lot/Serial No: _____	Tag No: _____ Expiration: _____
<b>Type of Dog:</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Spayed/Neutered \$7.00 <input type="checkbox"/> Not Spayed/Neutered \$12.00

***For more than three dogs, a MULTIPLE DOG LICENSE IS REQUIRED (contact Treasurer for information)***

Total dog fees: \_\_\_\_\_ Late fees if after April 1 (\$5.00 per dog): \_\_\_\_\_ Total enclosed: \_\_\_\_\_

Make check payable to **Town of Barton**. Include application, copy(ies) of rabies certificate(s) and payment

**Mail to:**  
 Town of Barton  
 3482 Town Hall Road  
 Kewaskum, WI 53040

**or place in drop box at:**  
 Town of Barton  
 3482 Town Hall Road  
 Kewaskum, WI 53040

For questions, contact Treasurer Elaine Gauthier at 262.334.2765 or [treasurer@bartontown.net](mailto:treasurer@bartontown.net)

# AFFIDAVIT

Complete, sign, and return to Town of Barton Treasurer

Name of dog: \_\_\_\_\_

A 20\_\_ dog license is not required by listed owner for last year's licensed dog because:

- Dog is deceased
- Dog ownership was transferred or has moved to:

Name: \_\_\_\_\_

City/Town/Village: \_\_\_\_\_

Name of dog: \_\_\_\_\_

A 20\_\_ dog license is not required by listed owner for last year's licensed dog because:

- Dog is deceased
- Dog ownership was transferred or has moved to:

Name: \_\_\_\_\_

City/Town/Village: \_\_\_\_\_

Name of dog: \_\_\_\_\_

A 20\_\_ dog license is not required by listed owner for last year's licensed dog because:

- Dog is deceased
- Dog ownership was transferred or has moved to:

Name: \_\_\_\_\_

City/Town/Village: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Penalties, Fees and Court Costs may be imposed by Governing Agencies for violation of dog licensing laws. Current Rabies information must be submitted before a dog license can be issued. A \$5.00 late fee shall be collected (when applicable) from owners of dogs not licensed by April 1st of each year.