



450 Park Street  
 Victoria Harbour, ON  
 L0K, 2A0, Canada  
 705-534-7248  
[www.tay.ca](http://www.tay.ca)

## DOG TAG LICENSE APPLICATION 2025

### Owner Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Phone Number: ( ) - - Email: \_\_\_\_\_  
 Civic Address: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
**\*If different from above\***

### Dog 1 Information

Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
 Colour: \_\_\_\_\_ Age: \_\_\_\_\_  Female  Spayed  
 Male  Neutered  
 Rabies Vaccination Date: \_\_\_\_\_ Rabies Expiration Date: \_\_\_\_\_  
 Clinic Name: \_\_\_\_\_ Clinic Phone Number: ( ) - -

**PROOF OF RABIES SHOWN**  
 \*INCLUDE COPY UPON SUBMISSION\*

Standard Dog Tag	1 Year Tag <small>(Rabies expiration 2025)</small>	2 Year Tag <small>(Rabies expiration 2026)</small>	3 Year Tag <small>(Rabies expiration 2027)</small>
<input type="checkbox"/> January 1 <sup>st</sup> – February 28 <sup>th</sup>	<input type="checkbox"/> \$20.00	<input type="checkbox"/> \$40.00	<input type="checkbox"/> \$60.00
<input type="checkbox"/> March 1 <sup>st</sup> – December 31 <sup>st</sup>	<input type="checkbox"/> \$30.00	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$70.00
*Vicious Dog Tag*	1 Year Tag	2 Year Tag	3 Year Tag
<input type="checkbox"/> January 1 <sup>st</sup> – December 31 <sup>st</sup>	<input type="checkbox"/> \$150.00	N/A	N/A

**\*SEE PAGE 2 TO COMPLETE\***

# DOG TAG LICENSE APPLICATION 2025

## Dog 2 Information (If Applicable)

Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
 Colour: \_\_\_\_\_ Age: \_\_\_\_\_  Female  Spayed  
 Male  Neutered  
 Rabies Vaccination Date: \_\_\_\_\_ Rabies Expiration Date: \_\_\_\_\_  
 Clinic Name: \_\_\_\_\_ Clinic Phone Number: ( ) - -

**PROOF OF RABIES SHOWN**

\*INCLUDE COPY UPON SUBMISSION\*

Standard Dog Tag	1 Year Tag <small>(Rabies expiration 2025)</small>	2 Year Tag <small>(Rabies expiration 2026)</small>	3 Year Tag <small>(Rabies expiration 2027)</small>
<input type="checkbox"/> January 1 <sup>st</sup> – February 28 <sup>th</sup>	<input type="checkbox"/> \$20.00	<input type="checkbox"/> \$40.00	<input type="checkbox"/> \$60.00
<input type="checkbox"/> March 1 <sup>st</sup> – December 31 <sup>st</sup>	<input type="checkbox"/> \$30.00	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$70.00
*Vicious Dog Tag*	1 Year Tag	2 Year Tag	3 Year Tag
<input type="checkbox"/> January 1 <sup>st</sup> – December 31 <sup>st</sup>	<input type="checkbox"/> \$150.00	N/A	N/A

Declaration: I hereby declare that the above information is true and complete to the best of my knowledge. I understand that a false statement or omission may lead to charges under the Township of Tay Canine Control By-law 2017-43 as amended. **I understand that a maximum of two (2) dogs may be harboured in a dwelling unit in the Township of Tay.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notice of Collection/Use/Disclosure:** Personal information is collected in this application pursuant to Section 8 and 11 of the *Municipal Act, 2001* and will be used in the event of dogs at large, incidents/complaints related to dogs and for the purpose of processing billing related to dog tags. Questions about the collection of personal information should be directed to the Municipal Clerk, Township of Tay, 450 Park Street, Victoria Harbour, ON L0K 2A0 705-534-7248 ext. 240.

\*INTERNAL USE\*

\*OWNER - SELECT METHOD OF OBTAINING TAG\*

Dog 1 Tag Number: _____	<input type="checkbox"/> Picked up <input type="checkbox"/> Mailed Out
Dog 2 Tag Number: _____	<input type="checkbox"/> Picked up <input type="checkbox"/> Mailed Out

Issued by: _____	Receipt #: _____	Date: _____ <small>(MM/DD/YYYY)</small>
------------------	------------------	--