

ANNUAL MAIL-IN REGISTRATION FORM

Please mail the following: 1. STAMPED, SELF-ADDRESSED ENVELOPE, 2. completed Registration Form, 3. a copy of valid Rabies Certificate, 4. (if applicable) a spay/neuter certificate, and 5. your check made payable to "City of Westfield"

to: License Division of the City Clerk's Office
59 Court Street, Room 217
Westfield, MA 01085

Owner's Name: _____

(please print)

Owner's Address: _____

Owner's Date of Birth: _____ Owner's Driver's License No. _____

Home Phone No. _____ Cell Phone No. _____

Dog #1 Name: _____

Dog #2 Name: _____

Breed: _____ Age: _____

Breed: _____ Age: _____

Color: _____ Sex: _____

Color: _____ Sex: _____

Rabies Expiration: _____

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Rabies Tag #: _____ Vet. _____

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Check one of the following

Spayed Female \$15.00 _____

Unspayed Female \$30.00 _____

Neutered Male \$15.00 _____

Unneutered Male \$30.00 _____

Check one of the following:

Spayed Female \$15.00 _____

Unspayed female \$30.00 _____

Neutered Male \$15.00 _____

Unneutered Male \$30.00 _____

Dog #3 Name: _____

PLEASE ALLOW 8 WEEKS FOR PROCESSING

Breed: _____ Age: _____

*In accordance with MA General Laws Chapter 140, Sections 137 and 147A, failure to renew by the deadline may incur violation fees from the Animal \ Control Officer.

Color: _____ Sex: _____

*Per Westfield Ordinance #1425, no person shall keep more than three dogs in a single family dwelling without first obtaining a kennel license in accordance with Westfield zoning code. Also, no more than one dog per apartment is allowed in any multifamily unit or condo.

Rabies Expiration: _____

Rabies Tag #: _____ Vet: _____

Check one of the following:

Spayed Female \$15.00 _____

Unspayed Female \$30.00 _____

Neutered Male \$15.00 _____

Unneutered Male: \$30.00 _____

This application may be rejected due to incomplete information, failure to license dog for previous year, etc.