



OFFICE OF THE WARREN CITY CLERK

Suite 205
One City Square
Warren, MI 48093-2393
Phone: (586) 574-4557

Form must be submitted with fee and rabies certificate.

DOG LICENSE APPLICATION \* NEW or RENEWAL \*

OWNER NAME:

OWNER ADDRESS: Warren, MI
street city, state ZIP

PHONE: ALTERNATE PHONE:

EMAIL ADDRESS:

FIRST DOG

NAME:
SPAYED/NEUTERED: YES NO
SEX (CIRCLE ONE): M F
AGE:
COLOR/MARKINGS:
BREED:
VET CLINIC:
VET PHONE:

OFFICE USE ONLY

LICENSE NO.
EXPIRATION YEAR:
RABIES EXPIRATION:

SECOND DOG

NAME:
SPAYED/NEUTERED: YES NO
SEX (CIRCLE ONE): M F
AGE:
COLOR/MARKINGS:
BREED:
VET CLINIC:
VET PHONE:

OFFICE USE ONLY

LICENSE NO.
EXPIRATION YEAR:
RABIES EXPIRATION:

THIRD DOG

NAME:
SPAYED/NEUTERED: YES NO
SEX (CIRCLE ONE): M F
AGE:
COLOR/MARKINGS:
BREED:
VET CLINIC:
VET PHONE:

OFFICE USE ONLY

LICENSE NO.
EXPIRATION YEAR:
RABIES EXPIRATION:

Commit Records:

check (or money order) made payable to:
City of Warren

spayed/neutered NOT spayed/neutered

Table with license pricing: 1 YEAR RABIES VACCINATION: \$3.00/\$5.00, 3 YEAR RABIES VACCINATION: \$8.00/\$10.00

NOTE: ALL dog licenses expire April 30