



Township of Zorra 2016-2018 Dog Tag Application

Save Time,
Apply Online!
www.zorra.on.ca

Name of Owner: _____

Full Address, including 911 number and mailing address: _____

Home Phone: _____ Cell: _____

Email Address: _____

- If you no longer have a dog, please notify the Township Office at 519-485-2490 ext 221 or by email: admin@zorra.on.ca

Name of Dog 1: _____

Colour: _____ Age: _____

Breed: _____

Gender: Male / Female (circle one)

Tag Fee: \$15.00 per dog

Twp Only: Tag # Assigned: _____

Name of Dog 2: _____

Colour: _____ Age: _____

Breed: _____

Gender: Male / Female (circle one)

Tag Fee: \$15.00 per dog

Twp Only: Tag # Assigned: _____

Name of Dog 3: _____

Colour: _____ Age: _____

Breed: _____

Gender: Male / Female (circle one)

Tag Fee: \$15.00 per dog

Twp Only: Tag # Assigned: _____

(office use only)

Payment Received: \$ _____

Cash cheque Debit Taxes

Roll No: _____

- Owner certifies that rabies vaccination is up-to-date for all dogs listed.
 Owner certifies that dog(s) has not been declared a Dangerous Dog.
 Owner gives consent to release name & phone number if dog is found.

Signature: _____ Date: _____

Personal information contained on this form is collected pursuant to *The Municipal Freedom of Information and Protection of Privacy Act*, and will be used for the purpose of Dog Licensing and Canine Control. Questions about this collection should be directed to The Corporation of the Township of Zorra, 274620 27th Line, PO Box 306, Ingersoll, ON N5C 3J6. Phone 519-485-2490 Ext 228.