



Township of Zorra 2019-2021 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: dogtag@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: _____