

ANIMAL LICENSE

NO.

TOWN OF **Williston**

DATED

THIS CERTIFIES THAT

THE UNDERSIGNED, IS THE OWNER OR KEEPER OF THE ANIMAL KEPT AT

AND DESCRIBED AS FOLLOWS:

TEL:

NAME

AGE		SIZE			SEX			COLOR	PROMINENT BREED	SPECIES
YRS.	MO.	SM.	MED.	LG.	M	F	N			

FURTHER DETAILS

AND IS THE ANIMAL DESCRIBED IN RABIES VACCINATION CERTIFICATE NO.	EXPIRATION DATE
DATED	SIGNATURE OF OWNER OR KEEPER

IN RELIANCE OF THE ABOVE CERTIFICATE AND PAYMENT OF THE FEE OF \$

THE ANIMAL ABOVE DESCRIBED IS LICENSED FOR THE PERIOD ENDING APRIL 1,

NOTE: DOGS AND WOLF HYBRIDS MUST WEAR A COLLAR WITH LICENSE TAG ATTACHED THERETO.

Sarah Mason TOWN CLERK

IDS 802-479-2161