NANCY GAUSE MILLIKEN **COLUMBIANA COUNTY AUDITOR** 105 S MARKET ST - LISBON, OH 44432

Auditor's Office Hours: Mon.-Fri. 8 am-4 pm auditor@columbianacntyauditor.org 330.424.9515 X1006 Pound Hours: Mon.-Fri. 8 am-4 pm Sat. 9 am-Noon hwallace@ccclerk.org, 330.424.6663 X1756

No dog licenses sold online, in Person or mailed out until Dec 1st. Licenses cannot be transferred from one dog to another. Fees are non-refundable.

IT'S THE LAW (ORC 955.01)

All dogs three months of age or older must be licensed. No dog shall be harbored, kept, or owned without displaying a valid registration tag.

(The law applies regardless of whether the dog is kept inside or out.)

ON-LINE Online purchases can be made at www.doglicenses.us/OH/Columbiana. Convenience fees apply. Use the following temporary login information to bring up your application. Account ID: Password: By Mail or in person: 1. Credit cards are accepted in person at either the auditor's office or the dog pound only. 2. Satellite locations for in-person dog license sales are available on our website or by calling the auditor's office. 3. If registering more than 5 dogs, please write on back of this form. 4. Owner's name and address are mandatory per O.R.C. 955.01. 5. When a dog is found, only the owner's Phone #1 is provided to the public. Phone #2 & Phone #3 are "unpublished" and are for emergency office use only. 6. Donations to the pound help with shelter, food and medical care. Thank you for caring! 7. For further information, please visit our website listed above. RETURN BOTTOM OF THIS APPLICATION WITH FEES BY JANUARY 31st. KEEP THE TOP FOR YOUR RECORDS. Columbiana County Auditor Columbiana County Auditor		A_{i}	ge	Sex				Co	lor				Hair	Breed		Dog Nama		-Office Us	e-	Fee	Donalty
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A penalty shall be assessed if Dog License is not secured on or before January 31, or within 30 days after the dog becomes 3 months of age, is acquired, or is brought from outside the state. ORC Sec 955.01, 05. Owner Information The undersigned says that the facts indicated above ARE TRUE. TOTAL FEES \$ DONATION \$ TOTAL PAID \$ Street Address: (Mandatory) Mailing Address: if different(e.g. P.O. Box) Email:	6. 7. Color	For f	furth RICH es: Bl	er info	orma	B(WH=	n, pl T Whition	eas	ON K GF dog	M C KB R=G	Old IB) ray;	8 1 1 P 1 BD	THIS THIE Perindle ear 2024	APPLICATION WITTOP FOR YOUR RECE; TA=Tan; BR=Brown; RE=Red; C	COl	EES BY	JA	NUA Colu	RY 3 umbian eet St; I	31st.	nty Auditoi
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