

TOWN OF BELCHERTOWN

Theresa A. Camerlin, Town Clerk 2 Jabish St, Rm 201; PO Box 629 Belchertown, MA 01007-0629 tel. 413-323-0281 | fax. 413-323-0107 clerk@belchertown.org www.belchertown.org/clerk

OFFICE HOURS

Mon - Fri: 8:00am - 5:00pm Closed for lunch 12:30 - 1:30pm when short-staffed

2025 DOG LICENSE APPLICATION AND RENEWAL FORM

DUE DATE January 31, 2025

LICENSING FEES

	ETCET (SET (STEED			
is time to register or renew a license for your dog.	Altered (spayed or neutered) \$10.00 Non-altered \$15.00 Late Penalty on February 1 + \$10.00 Late Penalty on March 1 + \$30.00 Late Penalty on April 1 + \$50.00			

BY MAIL or DROP OFF

Complete the application form below, verifying owner information, street address, and pet description(s). Enclose the form in an envelope, including rabies certificate, proof of spay / neuter if first registration, and a check or money order for the total payable to **Town of Belchertown**. Do not send cash. Mail to the Town Clerk or drop it off in the drop box located at Town Hall.

ON-LINE

It If

Purchase or renew licenses online at www.doglicenses.us/MA/Belchertown using the Account ID and Password below. Credit card payments only. Per license convenience fee applies. Rabies certificate and proof of spay / neuter if first registration are required. These may be mailed, emailed to clerk@belchertown.org, or attached to the order during check-out.

> Account ID: Password:

All dogs six months or older located within the Town of Belchertown must be licensed. Licenses are renewable annually and are valid January 1 thru December 31. Licenses will only be issued for dogs with current rabies vaccination. Purchased licenses are non-refundable and non-transferable. Tags must be worn by dogs at all times. If your dog should become lost, please contact the Animal Control Officer at 413-519-1754.

Color Co	des: BI	∠=Blac	k; V	VH=	=Wł	nite;	GI	$\mathbf{R} = \mathbf{C}$	iray	; B l	D=E	dle; TA =Tan; BR =Brown; YE =	Yellow; RE =Red; TRI	=Tri-Color		
APPLICA	TION 1	for the	regi	stra	tion	of	dog	(s) 1	for t	he :	year	25	2 Jabish S	St, Rm 201; Be	Town of elchertown, MA	Belchertown 01007-0629
Age		Spay /	Color BL WH GR BD TA BR YE RE TRI							RF	197	Breed	Dog Name	Microchip	Rabies Expire (m/d/y)	Fee
TRS INO	(11/1)	reat	DE	,,,,,	GR	DD	171	DIC	1.D	TCL.	11(1				(111/4/3)	
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													By signing below, for each of the animals listed here, I certify that I am their owner and they have a current rabies vaccination. Mail me my tags \$ Total			
Owner Information																
Name												Signature of App	olicant			
street Address												Date Signed				
Mailing Ac												Phone 1	Phone 2			
City			_ :	State	·			Zi	pCo	de .		Email				