Dog Licenses

All dogs over the age of five (5) months must be licensed per Town Ordinance and State Statute. Dog license period is January 1 to December 31, 2022 and it is the owner's responsibility to renew them. Failure to license your dog may result in penalties. Notification to Jefferson County may result in contact from the Sheriff and a ticket for each dog not licensed. If you no longer have a previously licensed dog, please notify the Treasurer to remove the dog from our records.

Dog licenses may be obtained starting about mid-December by mail.

Dog License Fees	
Unaltered Male or Female	$10.00
Spayed Female or Neutered Male	$ 5.00
Kennel license	$50.00
Late Fee – per animal (after 3/31/20)	$ 5.00

Complete the license application form below (more forms are provided on the back if more than one dog) and attach a **current copy of the rabies certificate**. If a rabies certificate is not provided, you will NOT be issued a license. Please note, the rabies certificate MUST identify the dog vaccinated. Documentation should also confirm spay or neuter status.

For license requests by mail remember to enclose a **self-addressed, stamped envelope** to return your license to you. Rabies certificates are returned along with the license. Applications will not be returned. Make checks payable to: Town of Watertown

Mail to: Town of Watertown Treasurer
N8497 County Rd D
Watertown, WI 53094

Dog License Application **Year 2022**

Dog Owner Name _____

Address _____

Contact Telephone number _____ Email _____

Dog Name _____ Dog age or date of birth _____

Breed _____ Color _____

Please circle: Male/Female Spayed/Neutered/Unaltered

Rabies vaccination Date: _____ Next Rabies due: _____

Please attach current rabies certificate. If mailing application, include self-addressed, stamped envelope.

Dog License Application **Year 2022**

Dog Owner Name _____

Address _____

Contact Telephone number _____ Email _____

Dog Name _____ Dog age or date of birth _____

Breed _____ Color _____

Please circle: Male/Female Spayed/Neutered/Unaltered

Rabies vaccination Date: _____ Next Rabies due: _____

Dog License Application **Year 2022**

Dog Owner Name _____

Address _____

Contact Telephone number _____ Email _____

Dog Name _____ Dog age or date of birth _____

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Please circle: Male/Female Spayed/Neutered/Unaltered

Rabies vaccination Date: _____ Next Rabies due: _____

Dog License Application **Year 2022**

Dog Owner Name _____

Address _____

Contact Telephone number _____ Email _____

Dog Name _____ Dog age or date of birth _____

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Please circle: Male/Female Spayed/Neutered/Unaltered

Rabies vaccination Date: _____ Next Rabies due: _____