



# Town of Sterling

Office of Town Clerk

1 Park Street, Sterling, MA 01564

Phone: 978-422-8111 ext. 1 or 2

Fax: 978-422-0289

## FORM A

Make checks payable to:  
**TOWN OF STERLING**

Methods of payment:

**BY MAIL:**

Town Clerk  
1 Park Street  
Sterling, MA. 01564

or

**IN PERSON:**

Office of Town Clerk, Rm. 113

**OFFICE HOURS:**

M-T- 8:30- 4:00pm

F-8:30-11:30

### 2011 DOG LICENSE – APPLICATION / INVOICE

Applicant: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Town, State, zip code: \_\_\_\_\_

\*Emergency contact number \_\_\_\_\_, Telephone \_\_\_\_\_, e-mail \_\_\_\_\_.

**STERLING DOG LICENSING DEADLINE: April 15 - ANNUALLY**

**FAILURE TO LICENSE BEFORE DEADLINE WILL RESULT IN ISSUANCE OF A CRIMINAL CITATION**

\* **License requirement\*** - Valid rabies certificate for each dog licensed on file with Sterling Town Clerk

Please use Form A to license up to four dogs. Fill out form completely, date, sign and submit payment to apply.  
**Exempt from payment only:** In Sterling no dog license fee (only) shall be charged to the applicant dog owner of an assistance dog serving a blind, deaf or handicapped person or to any applicant dog owner 70 years older or older.

Dog(s) Name	Breed(s)	Color	Dog Sex (M OR F)	Neutered (N), Spayed (S) or Intact (I)	MICRO-CHIP Number (If applicable)	MA Rabies Tag Number	Fee
							\$
							\$
							\$
							\$

**Town Clerk note:** To receive dog tags by return mail please enclose additional \$2.00 for postage & handling. P&H = \$ 2.00

**LICENSE FEES:** Neutered or Spayed Dog = \$ 8.00/ per dog Intact Dog = \$ 12.00/ per dog Total Payment = \$ \_\_\_\_\_

**Note:** Anyone experiencing financial difficulty or hardships may request temporary assistance with payment from the office Town Clerk

**APPLICANT MUST SIGN HERE TO COMPLETE APPLICATION**

This application has been prepared and/or examined by me. Under the pains and penalties of perjury, I do declare that to the best of my knowledge all statements contained herein are true, correct and complete. I also certify each dog named within this application has been issued a valid rabies certificate by a licensed veterinarian.

Owner/applicant: \_\_\_\_\_

Signature

Date: \_\_\_\_\_

**TOWN CLERK OFFICAL USE ONLY**

License Tag number(s) issued: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

Issued by: \_\_\_\_\_

Town Clerk (signature)

Date: \_\_\_\_\_