



TREASURER'S OFFICE
 MONTGOMERY COUNTY, VIRGINIA
 W. RICHARD SHELTON, TREASURER

755 ROANOKE STREET, SUITE 1B, CHRISTIANSBURG, VIRGINIA 24073-3171

APPLICATION FOR DOG LICENSE

Effective July 1, 2007, veterinarians are required to notify localities when a dog is vaccinated for rabies. If the dog doesn't have a current Montgomery County dog license, then you need to purchase one. If not purchased within 90 days of vaccination date, the Treasurer will send the owner an Application for Dog License. If after 30 days of notice, the owner still has not purchased a dog license, the Treasurer shall notify animal control that an owner is in possession of a vaccinated animal without a current dog license.

IMPORTANT: State Law requires that all dogs **FOUR (4) MONTHS OLD OR OLDER** must have a certificate of rabies vaccination signed by the veterinarian with the veterinarian's license number and expiration date of the vaccination. Please complete and return this form to purchase the required DOG licenses.

****FOR EACH LICENSE PURCHASED, A CURRENT ORIGINAL CERTIFICATE OF RABIES VACCINATION MUST BE PRESENTED.**** (The certificate will be returned to you with the dog license.) Dog license must be fastened to a collar and worn by the dog. If a tag is lost or destroyed, apply for a duplicate tag immediately by presenting the original receipt to the Treasurer's Office.

Dog License Fees

_____ Male - \$5.00 each	\$ _____
_____ Female - \$5.00 each	\$ _____
_____ Unsexed (Female/Spayed or Male/Neutered) - \$3.00 each	\$ _____
_____ 20 dog kennel - \$25.00	\$ _____
_____ 50 dog kennel - \$35.00	\$ _____
Total remitted	\$ _____

Owner's Name: _____

Address: _____

Owner's Phone #: _____

Dog tags go on sale November 1st at the Treasurer's Office or the Blacksburg Municipal Building. Dog tags are due by January 31st of each year.

If paying by mail send check or money order payable to: **Montgomery County Treasurer, 755 Roanoke St., Suite 1B, Christiansburg, Va. 24073-3171.**

If paying with MasterCard or VISA by mail, complete and sign the authorization form below.

IF PAYING BY MASTERCARD OR VISA FILL OUT BELOW											
<input type="checkbox"/>			<input type="checkbox"/>			Expiration Date					
Credit Card Number											
Name on Card											
Signature											
Daytime Phone Number						Show Amount Paid here: \$					