

**Office Use Only**

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

License Number: \_\_\_\_\_

## 2023 Dog License Application

**\*\*Applications can also be filled out online at [www.louisvilleco.gov/doglicense](http://www.louisvilleco.gov/doglicense)**

Contact Information			
First Name		Last Name	
Street Address			Unit/Apt Number
Louisville, CO	80027	Cell Phone	Other Phone
Email Address			
Dog Information			
Dog Name		Dog Breed	Dog Age
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Spayed/Neutered <input type="checkbox"/> Yes <input type="checkbox"/> No	Color/Markings	Rabies Expiration Date
License Cost <input type="checkbox"/> Spayed/Neutered Dog - \$13.00 <input type="checkbox"/> Intact Dog - \$19.00			
Additional Dog Information			
Dog Name		Dog Breed	Dog Age
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Spayed/Neutered <input type="checkbox"/> Yes <input type="checkbox"/> No	Color/Markings	Rabies Expiration Date
License Cost <input type="checkbox"/> Spayed/Neutered Dog - \$13.00 <input type="checkbox"/> Intact Dog - \$19.00			
Proof of Rabies Vaccination			
Proof of Valid Rabies Vaccination for each dog is enclosed <input type="checkbox"/> Yes <i>*Proof is required in order for a license to be issued. Please send copies only – do not send originals.</i>			
Payment Information			
<input type="checkbox"/> Check or Money Order – please make payable to the <i>City of Louisville</i> <input type="checkbox"/> Credit/Debit Card – available either in person or information taken over the phone			Total Amount Due  \$

**Dog Owner Signature:** \_\_\_\_\_

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

**Please mail or deliver to:**  
The City of Louisville  
Attn: Dog License  
749 Main Street  
Louisville, CO 80027

**Applications can also be emailed to:**  
[clerksoffice@louisvilleco.gov](mailto:clerksoffice@louisvilleco.gov)

**City Clerk's Office Hours**  
Monday – Thursday, 8am to 4pm  
Friday by appointment only