



TOWN OF LEEDS

218 North Main Street • PO Box 460879 • Leeds, UT 84746 • Phone: 435-879-2447

DOG LICENSE APPLICATION

Please Print

Owner's Name: _____ Phone #: _____

Street Address: _____ Mailing Address: _____

Description of Dog: (Species, Breed, Color) _____

Dog's Name: _____ Sex: Male _____ Female _____

Date of Rabies Vaccination: _____
(Date Given - Date Expires)

All applications must include a copy of the rabies vaccination certificate from a licensed veterinarian and a photo of the dog.

LICENSE FEES: \$10.00 each
\$60.00 kennel permit (over 4 dogs plus \$10.00 each dog)

I certify the information above to be true and correct and have read and will comply with the Town of Leeds Animal Ordinance.

Owner Signature _____ Date _____

Issuing Agent _____ License Number _____

CASH ONLINE CHECK # _____