

Please print off a copy of this form and mail it with the applicable fees, and a rabies and neuter/spay certificate to:

Town of Ledyard  
Town Clerk's Office  
741 Colonel Ledyard Highway  
Ledyard, CT 06339

New or Renewal (circle one)	Old Tag Number: _____
<b>OWNER INFORMATION</b>	
Last Name _____ First _____ Middle Initial _____	
Street Number and Address _____	
Work Telephone Number: _____ Home Telephone: _____	
Dog's Date of Birth: _____	
<b>DOG INFORMATION</b>	
Dog or Kennel Name: _____	
Breed of Dog: (do not enter "mutt" or "mix" - requires at least one breed name) _____	
Age of Dog: _____ Sex of Dog: _____ Spayed or Neutered (circle one if applicable)	
Color of Dog: _____	
Print your name: _____	
Signed under penalty of perjury: _____	
<b>DISPOSITION OF DOG</b>	
This is to certify that the previous description of a dog, formerly owned by me, has in fact:	
Died: _____ Other disposition: _____ New	
Owner: (See below)	
New Owner Information: _____	