

**CITY OF PEABODY - DOG LICENSE APPLICATION**

THIS DOG LICENSE APPLICATION IS A GENERIC NOTICE THE CITY CLERKS OFFICE SENDS WITH ALL CENSUS MAILINGS.  
PLEASE DISREGARD IF YOU DO NOT HAVE A DOG

In order to license your dog(s) we will need the following:

1. A copy of a valid Rabies Certificate
2. **NEW LICENSE FEES:** Male Neutered (N); Spayed Female (S) - **\$15.00**  
Male (M); Female (F) - **\$25.00 (Checks made payable to the City of Peabody)**
- **PLEASE INCLUDE A SELF ADDRESSED STAMPED ENVELOPE W/\$0.65 CENTS POSTAGE IF YOU WISH TO HAVE YOUR LICENSE MAILED TO YOUR RESIDENCE.**
3. Please fill this form out with the information requested below
4. **OR** you have the option of licensing using the City's On-Line Payment Center at [www.peabody-ma.gov](http://www.peabody-ma.gov)
5. **OR** you have the option of licensing using the GoPetie mobile app at --  
<https://nextpetls.gopetie.com/peabody.massachusetts/login>  
**(There will be an additional credit card/services fees charged for options 4 and 5)**

**Attention:** All dogs 6 months of age or older are required by law (Chapter 140. Sec 137, as amended) to be licensed on or before the 31<sup>st</sup> day of March every year. ALL LICENSE HOLDERS MUST BE 18 YEARS OF AGE OR OLDER. **Failure to comply is punishable by a fine of \$50.00 for the first offense and \$100.00 for second and subsequent offenses. There shall be a \$5.00 late fine imposed by the Animal Control Officer for any dog that has not been licensed on or before June 1<sup>st</sup> of the license year.**

Name of Owner or Keeper \_\_\_\_\_

Address \_\_\_\_\_ Unit/Apt \_\_\_\_\_ Peabody, MA 01960

Mailing Address \_\_\_\_\_ (if different)

Primary Contact No. \_\_\_\_\_ Email Address \_\_\_\_\_

Animal Clinic or Veterinary Hospital \_\_\_\_\_

Dog 1 Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Color: \_\_\_\_\_ Age: \_\_\_\_\_

Rabies Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: Male Neutered \$15.00 Female Spayed \$15.00  
(Month) (Day) (Year) Male \$25.00 Female \$25.00 **(Please circle one)**

Please check if this dog is a RENEWAL  NEW  **(PLEASE REMIT PAYMENT INDICATED ABOVE)**

Dog 2 Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Color: \_\_\_\_\_ Age: \_\_\_\_\_

Rabies Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: Male Neutered \$15.00 Female Spayed \$15.00  
(Month) (Day) (Year) Male \$25.00 Female \$25.00 **(Please circle one)**

Please check if this dog is a RENEWAL  NEW  **(PLEASE REMIT PAYMENT INDICATED ABOVE)**

Dog 3 Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Color: \_\_\_\_\_ Age: \_\_\_\_\_

Rabies Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: Male Neutered \$15.00 Female Spayed \$15.00  
(Month) (Day) (Year) Male \$25.00 Female \$25.00 **(Please circle one)**

Please check if this dog is a RENEWAL  NEW  **(PLEASE REMIT PAYMENT INDICATED ABOVE)**

**IF YOU NO LONGER HAVE A DOG PLEASE FILL IN BELOW**

OWNERS NAME \_\_\_\_\_

DOG'S NAME \_\_\_\_\_

Any Questions please call 978-538-5756