



2024

City of Warwick

Dog License Application

****Renew annually by mail during the month of April ****

Mail rabies certificate, \$10 check & self-addressed stamped envelope to:

City Clerk's Office/Dog License- Warwick City Hall 3275 Post Road Warwick, RI 02886

Date: _____

Lic#: _____

Pursuant to the general laws of Rhode Island 1956. Title 4, chapter 13 and the City of Warwick ordinance chapter 4, a license is hereby granted to:

Last Name: _____ First name: _____

Address: _____ Zip: _____

Phone: _____ Cell: _____

To keep one dog until the thirteenth day of April 2024, which is duly registered in this office and is described as follows:

Breed: _____ Age: _____ Years _____ Months

Female

Male

altered

Color: _____

Dogs Name: _____

Rabies Exp: _____

Vet: _____