

NAME: _____

ADDRESS: _____

TELEPHONE: _____

DO NOT DETACH - RETURN ENTIRE APPLICATION WITH PAYMENT

Breed	Name	2026 Tag #	Amount Paid
		Total:	

☐ Cash ☐ Check ☐ Credit Card

NAME: _____

ADDRESS:

TELEPHONE: _____

New Name?
Y / N

New Address?
Y / N

Owner ID:

Year: 2026

Processed on:

By:

[illegible]

Under penalty of law, I hereby certify that the information stated on this form is true and accurate to the best of my knowledge.

Sign Here: _____ Date Signed: _____

Postage: (if mailing form)	\$2.00
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Total Due:☐ Cash ☐ Check ☐ Credit Card

Mail the following with the return envelope by January 31st to avoid a penalty.

- Check or money order made payable to: Jackie McKee Holmes County Auditor
- Entire form

Please allow two to three weeks for processing.

OR

- Take this form to any agency selling dog licenses

FEE:

\$ 19.00 per dog

PENALTY:

Additional \$19.00 per
dog after January 31.

3 year & Lifetime tags
available at the Holmes
County Auditor's Office

HOLMES COUNTY DOG WARDEN

330-674-6301