**Town of Boxford  
2024 Kennel License Application**

**Dog licenses may be purchased online at https://epay.cityhallsystems.com/selection**

* Massachusetts requires that any household with 4 or more dogs, 3 months or older, obtain a kennel license.
* A kennel license may not be issued until the kennel has passed inspection by an animal control officer.
* The cost of a kennel license is $125. The town’s canine by-law imposes a late fee of $40 in addition to the license fee after January 31st.

Please fill out the information below and return this form to the Town Clerk’s office at 7A Spofford Road, with:

* A check for the appropriate amount made out to the Town of Boxford
* Proof of current rabies vaccination for each dog, and
* Proof of spaying or neutering, if applicable (certificate or note from veterinarian)

Once your payment and necessary information is received by the Town Clerk’s office, the animal control officer will

contact you to arrange for an inspection.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Owner’s name: | |  | | |
| Address: |  | | | |
| Telephone numbers: | | | |  |
| Email addresses: | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | 1 | | | 2 | | 3 | 4 | 5 | | | 6 | | 7 | | | 8 | 9 | 10 | |
| Dog’s Name | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Rabies Expiration | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Gender | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Spayed or Nuetered | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Age | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Breed | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Veterinarian | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| Vet Phone | |  | | |  | |  |  |  | | |  | |  | | |  |  |  | |
| If a dog previously licensed in Boxford is no longer living with you, please enter the dog’s name here so that we may | | | | | | | | | | | | | | | | | | | |
| update our records: | | | |  | | | | | | | | | | | | | | | |
| **Please do not write below this line** | | | | | | | | | | | | | | | | | | | |
| Tag Numbers | | |  | | | | | | |  | | | Received By | | |  | | | |
| Date |  | | | | | | | | |  |  | | | |  | | | | | |
| Cash or Check Number | | | | | |  | | | |  |  | | | |  | | | | | |