



TOP Dog Entry Form:

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Would you like to receive your renewal notification via email: Yes  No

Dog Name: \_\_\_\_\_

Dog License Number: \_\_\_\_\_

Please complete form and submit with photo of your dog prior to April 30, 2021 to:

City Clerk  
41 City Hall Place  
Plattsburgh, NY 12901

If you prefer you can email this form and photo of dog to City Clerk through April 30, 2021 to:

[parrottes@cityofplattsburgh-ny.gov](mailto:parrottes@cityofplattsburgh-ny.gov)