

**City of Courtland**  
329 Main Street, PO Box 42  
Courtland, MN 56021  
507-354-7055 office, 507-354-8156 Fax  
e-mail: [ctlclerk@comcast.net](mailto:ctlclerk@comcast.net)

## Dog License

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

Property Address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_

Today's Date: \_\_\_\_\_

\$8.00 per dog

\*please provide copy of rabies vaccination

Owner signature: \_\_\_\_\_

City official: \_\_\_\_\_

Office use: \_\_\_\_\_ received vaccination information

Tag Number: \_\_\_\_\_