

TOWN OF BARRINGTON  
Town Clerk's Office  
283 County Road  
Barrington, RI 02806  
(401) 247-1900 ext. 301

<b>OFFICE USE ONLY:</b> Date Paid: _____ Tag #: _____ Rabies Exp.: _____ Method of Payment: _____ Mail/Walk-in: _____
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**DOG AND CAT LICENSE APPLICATION**  
**(All Dog and Cat Licenses Valid from May 1<sup>st</sup> to April 30<sup>th</sup>)**

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Please fill in the application below with complete and valid information.

*A CURRENT, VALID RABIES CERTIFICATE MUST ACCOMPANY THIS APPLICATION FOR ALL ANIMALS & SPAY/NEUTER CERTIFICATE (FOR CATS LICENSING FOR THE FIRST TIME ONLY)*

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**OWNER INFORMATION**

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

Street No. and Street Name \_\_\_\_\_, Barrington, RI 02806

Phone Number \_\_\_\_\_

E-mail Address (If given, renewal reminder will be sent by e-mail only):  
\_\_\_\_\_

**PET INFORMATION**

Pet Name: \_\_\_\_\_

Please Circle:  Dog /  Cat      Sex:  Male /  Female      Spayed/Neutered:  Yes /  No

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

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**FEE SCHEDULE:** Dog License \$6.00 each; Cat License \$5.00 each

TOTAL ENCLOSED: \_\_\_\_\_

Checks should be made payable to **TOWN OF BARRINGTON.**

If paying by mail, your tag will be mailed to you upon receipt of payment.

If paying in person, forms of payment accepted are CASH or CHECK to **TOWN OF BARRINGTON.**

*In accordance with RI General Laws §4-13-4 and Chapter 67 of the Ordinances of the Town of Barrington, as amended.*