

The following affidavit is to be filled out by the owner if unable to produce proof that the dog has been spayed/neutered:

AFFIDAVIT FOR SPAYED OR NEUTERED DOG

County of Onondaga Onondaga
City or Town Marcellus

Dog I.D. Number

I _____ residing at _____ being
duly sworn says that I am the owner of a dog as described as follows:

Breed _____ ; Age _____ yrs.; Color: _____

Markings: _____, Sex: _____, Name: _____

This dog was Spayed / Neutered by Dr. _____

Address: _____

State of: _____ on or about(date): _____

This affidavit is made to obtain a license for the dog described above.

(Applicant)

sworn to me on this _____ day of _____.

(Officiant Name/Title)