

GREENE COUNTY AUDITOR
69 GREENE STREET
XENIA, OHIO 45385



OFFICE HOURS
Monday - Friday
7:30AM - 4:30PM
(937) 562-5065

Animal Control
(937) 562-7400

INSTRUCTIONS FOR GREENE COUNTY DOG LICENSES:

**IT'S THE LAW
(ORC 955.01)**

All dogs three months of age or older must be licensed. No dog shall be harbored, kept, or owned without displaying a valid registration tag.
(The law applies regardless of whether the dog is kept inside or out.)

Instructions for how to acquire a dog license

ON-LINE	BY MAIL (No Cash)	IN PERSON
Go to www.doglicenses.us/OH/Greene and enter the following: Account ID: Password:	<ul style="list-style-type: none"> Complete/review the information below to ensure it is correct. Mail this document, a check (made payable to Greene County Auditor), and a self-addressed stamped envelope to: Greene County Auditor Dog Licenses 69 Greene St Xenia, OH 45385 	Visit the County Auditor's Office at: 69 Greene St, Xenia From 7:30am to 4:30pm Monday through Friday Or the Animal Control Office at: 641 Dayton Xenia Rd, Xenia Monday through Friday 9am to 6:30pm and Saturday and Sunday 12pm to 4pm

*****A penalty shall be assessed if a Dog License is not secured on or before January 31, or within 30 days after the dog becomes three months of age, is acquired, or is brought from outside the state. ORC Sec 955.01,05.**

Dogs may be registered for a 1 year or 3 year term, or permanently. Complete each line of the application for your dog(s). In particular, choose your "Term" (1 Year, 3 Year, or Permanent -- see term codes below) and fill in "Fee Paid" based on the fee structure to the right of this paragraph. **No Refunds Permitted**

2025 LICENSE FEES			
	1 YR	3 YR	Permanent
Before Feb 1st	\$20.00	\$60.00	\$200.00
After Jan 31st	\$40.00	\$80.00	\$220.00

Certificate of registration and registration tags shall be valid only during the calendar year or years for which they are issued. ORC Sec 955.09.

Color Codes: BL=Black; WH=White; GR=Gray; BD=Brindle; TA=Tan; BR=Brown; YE=Yellow; RE=Red

APPLICATION for the registration of dog(s) for the year 2025

Age		Sex	Spay/	Color								Hair	Breed	Dog Name	Term (1/3/P)	Fee Paid	Penalty	--- Office Use ---
YRs	MOs	(M/F)	Neut	BL	WH	GR	BD	TA	BR	YE	RE	(S/M/L)						2025 License #

Donation to the Animal Care Fund to help support the homeless animals of Greene County



DONATE NOW



Donation to the Animal Care Fund	\$
Total Fees, Penalty and Donation	\$

Owner Information

Name: _____

Street Address: _____

Mailing Address: _____
if different(e.g. P.O. Box)

City: _____ State: _____ Zip Code: _____

The undersigned says that the facts indicated above ARE TRUE.

Signature of Applicant _____

Date Signed _____

Phone # _____ Email _____