

CHAIRPERSON
STEVE HAZELTINE
608-879-9988

SUPERVISOR
DAN DREFAHL
608-728-2976

SUPERVISOR
DAVE BRETHHAUER
608-897-4166

CLERK – JULIE GERKE
svclerk@ckhweb.com
608-897-5092

CHECK OUR NEW WEBSITE AT www.townofspringvalley.com

TOWN OF SPRING VALLEY

Payment of 2015 Taxes

Payment of taxes will be made at the Rock County Court House.

Mailing Address: Rock County Treasurer
P O BOX 1508
Janesville WI 53547-1508

There will be no tax collection at my home. Court House hours are 8:00 A.M to 5:00 P.M., Monday through Friday. The Court House will be closed **December 24 & 25, 2015 and January 1, 2016.**

Make Checks payable to Rock County Treasurer.

Please include Tax ID Number with your payment. If you are requesting a receipt, please enclose a stamped self-addressed envelope. No receipt will be sent without.

Payment can also be made by Credit Card/echeck. Use the GovTech site though the link on www.co.rock.wi.us. This web site also includes Lottery Credit Forms and answers to Frequently Asked Questions.

Lottery Credit – Please check your Tax Bill for the lottery credit. Property that was **owner** occupied on January 1, 2015, is allowed a lottery credit. If the credit does not show on your Tax Bill, fill out a Lottery Credit Card and forward it to the County Treasurers office.

I can be reached at 608-289-3902 for questions. Janet Hillison Treasurer

Dog License Fees

According to state law every dog over 5 months old must be licensed and have a rabies vaccination. Payments can be made by mail or at my home when I'm available. **Please enclose a copy of your rabies vaccination certificate when applying by mail and I will return it to you.**

Mail to: Janet Hillison
1917 S State Road 213
Orfordville, WI 53576

Make checks payable to Town of Spring Valley.

Cost of License: \$3.00 Spayed or Neutered Dog
\$8.00 Male or Female
\$4.00 Puppies will turn 5 mo. old by July 1, 2016
\$1.50 Neutered Pups-Will turn 5 mo. after July 1, 2016
\$35.00 Multiple Dog (Customer gets 12 tags)
Dogs in excess of (12) \$3.00 per Dog each tag

APPLICATION FOR DOG LICENSE

Owners Name _____

Owners Address _____

_____ Telephone No. _____

1. Dogs Name _____ Yr. Born _____ Color _____

Breed _____

Sex _____ Altered _____ Unaltered _____

2. Dogs Name _____ Yr. Born _____ Color _____

Breed _____

Sex _____ Altered _____ Unaltered _____

(See reverse side for recycling, election, and website news)