

HARMONY TOWNSHIP 2009 DOG LICENSE APPLICATION

Owner's Name _____ Phone _____

Mailing Address _____

Street Address (if different from mailing) _____

Dog's Name _____ DOB _____ Age _____

Breed _____ Color _____

Circle One: Sex: M F Hair: Long Short Spay: Y N

Rabies Expiration Date: _____ (Must not expire before November 2009)

If you are mailing the application, Be sure to include:

1. \$5.20 if neutered/spayed
\$8.20 for non-neutered/non spayed
Check or M.O. made out to Harmony Township
2. Current proof of rabies vaccination showing expiration date expiring no earlier than November 1, of licensing year. All documentation received will be returned to you with the license, in your enclosed self-addressed, stamped envelope.
3. Proof of neutering/spaying.
4. Return to Harmony Township Municipal Building
c/o Animal Licensing
3003 Belvidere Road
Phillipsburg, NJ 08865

AS PER STATE LAW, AN ANIMAL LICENSE CANNOT BE ISSUED IF THE CURRENT RABIES VACCINATION EXPIRES PRIOR TO THE FIRST TEN MONTHS OF THE CURRENT LICENSING PERIOD.

Please select one of the following:

_____ **New Application** _____ **Renewal**

_____ **I have paid the required fee and would like my license mailed directly to my home.**

_____ **I have not paid the required fee and would like to be notified by phone when the license is ready for pickup. I agree to pay the fee at the Municipal Office at that time.**

Payment: _____

Filled out by Licensing Officer