TOWNSHIP OF MILLBURN



375 Millburn Avenue Millburn, NJ 07041

Phone: (973) 564-7087 Fax: (973) 564-7569

DOG LICENSE APPLICATION

OWNER INFORMATION NAME:	New Renewal
ADDRESS:	PHONE: HOME/CELL: ()
DOG INFORMATION	
NAME:	AGE/DATE OF BIRTH:
BREED:	COLOR: HAIR: Long/Medium/Short
SEX: Male/Female	SPAYED OR NEUTERED: No/Yes IF YES, DATE:
NAME OF VETERINARIAN	·
RABIES INOCULATION*:	Date Expires:
*Rabies Vaccination Certificate must	be submitted with license application and must be valid through October 31.
inoculation requirement shall be gracement be vaccinated due to a medic OWNER'S SIGNATURE	
	\$18.00-Spayed or Neutered Dog
	\$21.00- Unaltered Dog
• \$10.00 Late Fee ap	plies for licenses renewed after February 28 th . Late fee does
not apply to dogs n	ew to Millburn Township
 Return your complete 	eted application, along with rabies vaccination certificate and
,	le the "Township of Millburn Township" to:
, ,	wnship Health Department, 375 Millburn Avenue, Millburn,
 However if paying i 	n Town Hall, please kindly pay by check or exact change.
***For office use only	:
	Cash/Check/Receipt#
Permit: Handed/left for	Pickup/Mailed on