



Dog License 2011-APPLICATION WASHINGTON BOROUGH

Please print or type

| | |
|---|---|
| Name: | |
| Address: | |
| Telephone: | |
| Dog's Name: | |
| Dog: M F (Circle one) | |
| Breed: | |
| New Dog or Previously registered (Circle one) | |
| Age or Date of Birth: | |
| Hair: Short Med Long (Circle one) | |
| Color / Markings: | |
| Spay/Neutered: Yes No (Circle one) | Date if Known: _____ |
| Rabies Vaccination Expired: | _____ **** Attach vaccination certificate with your application |

***** Please Note that your vaccination certificate cannot have expired prior to March 2012. If it does you must have your dog revaccinated prior to renewing your dog license. However, if because of the dog's health they cannot be revaccinated then you must provide a letter from your Veterinarian. (Please attach it to this application)**

***** Dog Licenses are due from May 1st – May 31st After due date there will be a Late Charge \$3.00 PER MONTH.**

| | | |
|--------------|-------------------------|----------------------------|
| License Fee: | \$11.20 for Spayed Dogs | \$14.20 for Un-Spayed Dogs |
|--------------|-------------------------|----------------------------|

Please include your check with the proper amount made payable to the "Borough of Washington" your application and vaccination certificate. All papers will be return to you with your Dog License.

***** If you are forwarding this information by mail you are required to put (2) two (\$.44) cent stamps on a self address envelope.**

If you choose to bring your application into the office – **office hours are 8:30 AM – 12 Noon & 1PM - 4:30 PM – Office Hours are Only Monday thru Friday.**

Any questions regarding the renewal of your dog license please call 689-3600 Ext. 119 or 113

Please make check payable to: Borough of Washington

**Mail To: Borough of Washington
100 Belvidere Ave.
Washington, NJ 07882
Attn: Kristine D. Blanchard, R.M.C.
Debbie Smolar**