



BOROUGH OF HIGHLANDS

42 Shore Drive, Highlands, NJ 07732

732-872-1224

www.highlandsborough.org

ANIMAL LICENSE APPLICATION

Animal Information:

Dog Animal Name: _____

Cat Normal Vet Practice: _____

Rabies Expiration Date: _____

Vet/Clinic who Administered Rabies: _____

Age: _____ Sex: Female Male

Spayed or Neutered: No Yes If yes, date: _____

Hair: Short Medium Long

Breed: _____

Color: _____

Owner Information:

Name: _____

Street Address: _____

Home Phone #: _____

Cell Phone #: _____

E-mail: _____

Sign: _____ Date: _____

Fees & Proof of Rabies:

	<u>Spayed or Neutered</u>	<u>Not Spayed or Neutered</u>
License Fee:	\$18.00	\$21.00
	<u>Dog</u>	<u>Cat</u>
Licensing Year:	Jan-Dec	July-June
Renewal Due:	Jan 31 st	July 31 st
Rabies Vaccine Good Through:	Nov 1 st	May 1 st

State Statute requires that any rabies vaccination must not expire in the first ten (10) months of the current licensing year. Proof of rabies vaccination must be provided to obtain a license.

OFFICE USE ONLY	
License #:	Check #: