



**Borough of Hamburg · 16 Wallkill Avenue · Hamburg, NJ 07419**

Telephone: 973-827-9230 · Fax: 973-827-0466

## **DOG/CAT LICENSE APPLICATION**

**ALL DOGS/CATS OVER THE AGE OF SIX MONTHS ARE REQUIRED TO BE LICENSED YEARLY BY JANUARY 31<sup>ST</sup>.**

The State of New Jersey mandates that the **current rabies vaccination must be valid for ten full months of the licensing year and therefore cannot expire before November 1st of the licensing year.** (State Statute 4:19-15.a)

Licenses may be obtained at the Borough of Hamburg Municipal Building, 16 Wallkill Avenue, Hamburg, New Jersey 07419 **OR** by mailing this form and the required items to the above address.

### **Be sure to include the following:**

- THIS FORM COMPLETE WITH THE INFORMATION REQUESTED BELOW
- CHECK PAYABLE TO **BOROUGH OF HAMBURG**
- SELF-ADDRESSED STAMPED ENVELOPE (to mail license and tag to you)
- COPY OF VALID **CURRENT** RABIES CERTIFICATE (**MANDATORY (see above)**)
- COPY OF PROOF OF SPAYING OR NEUTERING (new or newly spayed/neutered animals)



### **LICENSING FEES:**

Spayed / Neutered pet.....\$16.00

Non-spayed / Non-neutered pet .....\$19.00

**As stated above – Licenses must be renewed each year. No renewal applications will be processed before January 1<sup>st</sup> of the licensing year. A \$5.00 per month late fee will be assessed for all licenses un-renewed as of February 1<sup>st</sup> of the licensing year.** If your dog/cat is eligible for licensing and is not licensed by March 1<sup>st</sup> of the licensing year, a summons will be issued which may involve a court appearance.

**NOTE: PLEASE INFORM THE BOROUGH IF YOU NO LONGER HAVE A PET.**

### **Owner Information:**

|                      |         |
|----------------------|---------|
| First and Last Name: | Date:   |
| Address:             | Phone:  |
| E-Mail address:      | Mobile: |

### **Pet Information:**

|                                                    |                                               |
|----------------------------------------------------|-----------------------------------------------|
| Pet's Name:                                        | TYPE: (check one)      DOG      CAT           |
| Hair: (check one)      Short      Medium      Long | Breed:                                        |
| Color/Markings:                                    | Sex: (check one)      MALE      FEMALE        |
| Birthdate/ Age:                                    | Spayed/Neutered: (check one)      YES      NO |

Office Use Only: Rabies Exp. Date: \_\_\_\_\_  
Spay/Neutered Confirmed: ☐  
License No. \_\_\_\_\_

Date Stamp