

**Buena Vista Township
890 Harding Highway, Buena, NJ 08310**

ANNUAL DOG LICENSING NEW/RENEWAL FORM

OWNER'S NAME: _____

ADDRESS: _____

MAILING ADDRESS: _____

(If different than above)

TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

Pet Information

1. PET'S NAME: _____

2. BREED: _____

3. SPAYED OR NEUTERED

() YES: **FEE \$15.00**

OR

() NO: **FEE \$18.00**

VETERINARIAN: _____

(Must provide certificate of proof of spay/neuter)

4. COLOR & MARKINGS: _____

5. SEX: M _____ F _____

6. DATE OF BIRTH: _____ AGE: _____

7. ANIMAL SIZE: SMALL _____ MEDIUM _____ LARGE _____

8. HAIR TYPE: SHORT _____ MEDIUM _____ LONG _____

9. RABIES EXPIRATION: _____

(MUST BE GOOD THRU OCTOBER OF CURRENT YEAR)

MAIL THIS COMPLETED APPLICATION ALONG WITH CURRENT RABIES RECEIPT (UNLESS ON FILE) AND PAYMENT TO: **BUENA VISTA TOWNSHIP, 890 HARDING HIGHWAY, P.O. BOX 605, BUENA, NJ 08310. ALL ORIGINAL DOCUMENTS WILL BE RETURNED TO YOU ALONG WITH YOUR 2026 LICENSE.**

**Saturday, March 7, 2026
FREE RABIES CLINIC**

**Richland Fire Hall
10:00 A.M. – 1:00 P.M.**

**Saturday, March 21, 2026
FREE RABIES CLINIC**

**Collings Lakes Fire Hall
10:00 A.M. – 1:00 P.M.**