

# Mount Olive Township

## Dog License Application

RETURN TO:  
Mt. Olive Health Dept.  
P.O. Bo 450  
Budd Lake, N.J. 07828

FEES:  
Altered: \$11.00  
Unaltered: \$14.00  
Late Fee: \$3.00 per month after 1/31

**Make checks payable to "Mt. Olive Township"**

PLEASE PRINT THE FOLLOWING INFORMATION:

OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

MAILING ADDRESS (If different) \_\_\_\_\_

DOG'S SEX: (M) (F) NEUTERED: (Y) (N) SPAYED (Y) (N) COLOR: \_\_\_\_\_

BREED: \_\_\_\_\_ AGE: \_\_\_\_\_ LENGTH OF HAIR (L) (S)

DOG'S NAME: \_\_\_\_\_ \*\*DATE OF RABIES INNOC: \_\_\_\_\_

\*\*The state of N.J. requires written proof of current rabies vaccination. The vaccination must be good for the duration of the license issued. Written proof of spaying or neutering will be needed for price reduction. Please mail copies with this form when applying. For additional information, contact Animal Control Officer W. Cirone at 691-0900, Ext. 7334.

Owners Signature \_\_\_\_\_