

**MAPLE SHADE TOWNSHIP**  
**2020 DOG LICENSE APPLICATION FORM**

Name of Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Dog's Name: \_\_\_\_\_ Dog's Birth date: \_\_\_\_\_

Breed of Dog \_\_\_\_\_

Dog's Description (Color/Markings): \_\_\_\_\_

Rabies Expiration Date: \_\_\_\_\_ (New Jersey Law requires rabies vaccinations to be valid for 10 months of the licensing year.)

**Please Circle One**

Dog's Sex: M F

Spayed/Neutering Date: \_\_\_\_\_ Size of Dog: Small Medium Large

Length of Dog's Hair: Long Medium Short

Has dog been licensed here previously: Yes No

Attach check, proof of rabies inoculation, a spayed/neutering certificate (if applicable) and a self-addressed, stamped envelope.

**LICENSE FEES**

SPAYED/NEUTERED \$10.00

NON-SPAYED/NEUTERED \$13.00

LATE CHARGE AFTER JUNE 30, 2020 ADDITIONAL \$ 5.00