

GREENWICH TOWNSHIP
2009
APPLICATION FOR DOG LICENSE

NAME_____

ADDRESS_____

PHONE NUMBER_____

DOG SEX: MALE_____ FEMALE_____

BREED_____

AGE_____

HAIR: SHORT_____ MEDIUM_____ LONG_____

COLOR & MARKINGS_____

NAME OF DOG_____

 SPAYED OR NEUTERED YES_____ NO_____

DATE OF PROCEDURE_____

PERFORMED BY_____

RABIES VACCINATION EXPIRES_____

LICENSE FEE:

Spayed / Neutered \$10.20
Non-Spayed / Non-Neutered \$13.20

*Please submit with application rabies certificate
indicating vaccination valid through 12/09
Applications will NOT be processed without
valid rabies certificate. **DOG LICENSE MUST**
BE RENEWED YEARLY.*

***Kimberly Viscomi, RMC
Township Clerk***

Send To: Greenwich Township
321 Greenwich Street
Stewartsville, NJ 08886
Attention: Animal Control Officer