



ALEXANDRIA TOWNSHIP

242 Little York – Mt. Pleasant Road Milford, NJ 08848

APPLICATION FOR DOG LICENSE: *Please Print*

PET NAME: _____

HAIR: (Circle one) Short Medium Long

BREED: _____ COLORING: _____

SEX: (Circle one) Female Male SPAYED/NEUTERED: (Circle one) Yes No

DOG'S DATE OF BIRTH: _____ AGE: _____

RABIES VACCINE EXPIRATION DATE: _____ *must be valid until 11/1/18*

OWNER'S INFORMATION: *Please Print*

NAME: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____

FEES (*late fee will apply after February 12th*)

Spayed/Neutered:.....**\$15.00**

Late Fee:.....\$25.00 plus license = **\$40.00**

Non-Spayed/Neutered:.....**\$18.00**

Late Fee:.....\$25.00 plus license = **\$43.00**

In order to apply by mail you must include a ***Stamped/Self-addressed envelope***
AND a copy of the Rabies Certificate

Checks should be made payable to: ***Alexandria Township***



please cut along dotted line