



DATE: _____

CHECK# _____ CASH _____ CREDIT _____

TOWNSHIP OF LONG HILL 2025 DOG LICENSE APPLICATION

NAME OF OWNER: _____
LAST NAME FIRST NAME MI

ADDRESS: _____
STREET TOWN ZIP CODE

HOME PHONE NUMBER: _____ UNLISTED? YES [] NO []

CELL PHONE NUMBER: _____

OFFICE NUMBER: _____ EMAIL ADDRESS: _____

DOG#1 LICENSE# _____

DOG'S NAME: _____ VETERINARIAN: _____

RABIES EXPIRATION DATE: _____ RABIES ISSUE DATE: _____ AGE: _____

SEX: M [] F [] SPAYED/NEUTERED: Y [] N [] HAIR: SHORT [] MEDIUM [] LONG []
SIZE: SMALL [] MEDIUM [] LARGE []

BREED: _____ COLOR: _____

DOG#2 LICENSE# _____

DOG'S NAME: _____ VETERINARIAN: _____

RABIES EXPIRATION DATE: _____ RABIES ISSUE DATE: _____ AGE: _____

SEX: M [] F [] SPAYED/NEUTERED: Y [] N [] HAIR: SHORT [] MEDIUM [] LONG []
SIZE: SMALL [] MEDIUM [] LARGE []

BREED: _____ COLOR: _____

DOG#3 LICENSE# _____

DOG'S NAME: _____ VETERINARIAN: _____

RABIES EXPIRATION DATE: _____ RABIES ISSUE DATE: _____ AGE: _____

SEX: M [] F [] SPAYED/NEUTERED: Y [] N [] HAIR: SHORT [] MEDIUM [] LONG []
SIZE: SMALL [] MEDIUM [] LARGE []

BREED: _____ COLOR: _____

Please check here if you no longer own your dog _____

FEES: \$22.20 (Spayed/Neutered)
\$25.20 (Non-Spayed/Non-Neutered)

LATE FEE: Additional \$10.00 per dog for renewals after 1/31/2025
Additional \$20.00 per dog for renewals after 2/28/2025

Please Note: Dog License tags are non-transferable, and the fee is non-refundable

PLEASE MAKE SURE YOU HAVE ENCLOSED:

*SELF-ADDRESSED STAMPED ENVELOPE

*PROOF OF RABIES VACCINATION - must be valid until at least October 31, 2025.

*PROOF OF SPAYED/NEUTERED IF APPLICABLE (if first time licensing dog as spayed or neutered).

*CHECK OR MONEY ORDER make payable to: "LONG HILL TOWNSHIP".

*Mail to: Township of Long Hill, 915 Valley Road, Gillette, NJ 07933, Attn: Dog License.