

COURTESY NOTICE REGARDING ALLOWAY TWP DOG LICENSING

Chapter 58 of the Alloway Township Code requires that any dog over the age of seven months shall be inoculated against rabies and licensed by its owner. Dog licenses must be obtained on or before February 15th each year; but not before January 1st of the licensing year.
Late fees will be imposed starting February 16, 2018.

2018 DOG LICENSING FEES

Please be advised that we **CANNOT** process any 2018 licenses or payments before January 1, 2018. Please **DO NOT** bring or mail payment in 2017.

January 1st - February 15th

Spayed/Neutered	\$15.00/dog
Non-Spayed/Non-Neutered	\$18.00/dog

February 16th - December 31st

Spayed/Neutered	\$35.00/dog
Non-Spayed/Non-Neutered	\$38.00/dog

To License Your Dog(s) By Mail:

Complete and mail the License Form below, together with:

- *The dog's **current** rabies certificate (**expiration date must be 11/1/18 or later**)
- *Proof of sterilization (spay/neuter) including date & name of vet
- *Appropriate fee (Check or Money Order payable to Alloway Township)
- *A stamped, self-addressed, envelope

Any paperwork attached will be returned to you along with the 2018 License and Tag.

To License Your Dog(s) In Person:

Visit the Municipal Clerk's Office, Municipal Building 49 South Greenwich St, 2nd Floor, Monday - Friday 9am - 1pm
Bring with you:

- *The completed License Form
- *The dog's **current** rabies certificate (**expiration date must be 11/1/18 or later**)
- *Proof of sterilization (spay/neuter) including date & name of vet
- *Appropriate fee (Check or Money Order payable to Alloway Township)

To License Your Dog(s) After Hours - Drop Box:

Located by the **south side** (*Waterworks Rd*) entrance door of the Municipal Building, 49 South Greenwich St
Complete the License Form below, place in envelope together with:

- *The dog's **current** rabies certificate (**expiration date must be 11/1/18 or later**)
- *Proof of sterilization (spay/neuter) including date & name of vet
- *Appropriate fee (Check or Money Order payable to Alloway Township)
- *A stamped, self-addressed, envelope

Any paperwork attached will be returned to you along with the 2018 License and Tag.

Owner Name: _____ Telephone: (____) _____

Street Address: _____

Mailing Address: _____

Dog Name: _____ Male / Female _____ Age: _____

Breed: _____ Color: _____ Fur Length: _____ Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N _____ Date: _____
(circle one)

FOR ADDITIONAL DOGS

Dog Name: _____ Male / Female Age: _____

Breed: _____ Color: _____ Fur Length: Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N
(circle one) Date: _____

Dog Name: _____ Male / Female Age: _____

Breed: _____ Color: _____ Fur Length: Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N
(circle one) Date: _____

Dog Name: _____ Male / Female Age: _____

Breed: _____ Color: _____ Fur Length: Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N
(circle one) Date: _____

Dog Name: _____ Male / Female Age: _____

Breed: _____ Color: _____ Fur Length: Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N
(circle one) Date: _____

Dog Name: _____ Male / Female Age: _____

Breed: _____ Color: _____ Fur Length: Short / Medium / Long

Vet: _____ Spayed/Neutered Y / N
(circle one) Date: _____

I, _____, the applicant/owner of the above licensed dogs,
certify that I am not operating a commercial breeding facility and/or kennel.

Signature

Date