

**BOROUGH OF ALLENTOWN**

P.O. Box 487, 8 North Main Street  
Allentown, New Jersey 08501  
Telephone (609) 259-3151  
FAX (609-259-7530  
[www.allentownboronj.com](http://www.allentownboronj.com)

**Animal License Application**

DOG \_\_\_\_\_ CAT \_\_\_\_\_

Animal Name \_\_\_\_\_

Age \_\_\_\_\_ SEX \_\_\_\_\_ Hair Length \_\_\_\_\_ (short, medium, long)

Breed \_\_\_\_\_ Color \_\_\_\_\_

Rabies Expiration Date- *Must provide proof* \_\_\_\_\_ Spayed/Neutered- *Must Provide Proof* \_\_\_\_\_

- *The State of New Jersey requires rabies vaccine be in effective for 10 months of the licensing year.*
- *The Borough of Allentown's' licensing year runs annually April 1<sup>st</sup> – March 31<sup>st</sup>.*
- *Vaccines must be current through January 31<sup>st</sup> of the following year.*

Owner's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell phone \_\_\_\_\_

**Make Checks Payable to: Borough of Allentown**

<b>FEES: \$11.20 Altered Dog</b>	<b>\$14.20 Non Altered Dog</b>
<b>\$5.00 Altered Cat</b>	<b>\$6.00 Non Altered Cat</b>

**Return this application with the payment, documents and a self-addressed stamped envelope to;**

**Allentown Borough  
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Allentown, New Jersey 08501**