CAT & DOG LICENSES DUE JANUARY 31st

During the month of January, Borough Ordinance requires the licensing of all cats and dogs. Licenses can be obtained at the Borough Clerk’s Office, Monday through Friday, 8:00 a.m. to 4:00 p.m. Cat and dog owners who fail to obtain or renew a license by January 31 of the current year will be subject to a $5 late fee.

The State requires each municipality to conduct a dog census in the Spring. Pet owners who have not obtained a license by that time will be issued a summons by the Police Department, which carries a $20 fine. If you no longer own a cat or dog, contact the Borough Clerk’s Office at 732-842-2400. Leave your name and address so it can be removed from the database.

Licensing Instructions
Fees:
$15 for cats/dogs not spayed or neutered
$12 for cats/dogs spayed or neutered
Submit veterinarian’s certificate of spaying or neutering, and proof of rabies inoculation.

PROOF OF RABIES INOCULATION MUST BE SUBMITTED
Dog owners: Renewals for 2019 dog licenses must have a rabies expiration date of November 1, 2019 or later.

Note: Borough auditor requires separate banking accounts for cats and dogs. Therefore, when submitting your payment, please write a separate check for cats and dogs.

To Apply by Mail
Enclose:
• Check(s) payable to “Borough of Little Silver”
• Certificates indicated above (certificates will be returned with license)
• Stamped, self-addressed envelope
• Completed application
Send to: Borough Hall
480 Prospect Avenue
Little Silver, NJ 07739
Attn: Pet Licensing

To Apply In Person
Submit:
• Check(s) payable to “Borough of Little Silver” or exact change
• Certificates indicated above
• Completed application

If you no longer own a cat or dog, contact the Borough Clerk’s Office at 732-842-2400. Leave your name and address so it can be removed from the database.

CAT/DOG LICENSE APPLICATION

Animal Information
Cat ☐ Dog ☐ Hair Length: ______________________
Spayed/Neutered: Yes ☐ No ☐
Cat/Dog Name: _______________________________________
Last License #:_______________ Breed:_________________
Age: ______________ Color: ________________________
Veterinarian:________________________________________

Owner Information
Last Name:__________________________________________
First Name:__________________________________________
Street:______________________________________________
City: Little Silver   State: NJ   Zip Code: 07739
Phone # Home:________________________________________
Phone # Cell:________________________________________
Email:_______________________________________________

Please do not mail pet license form with payment prior to January 1st