**DOG LICENSE APPLICATION**

- ☐ 1 Year License
- ☐ 3 Year License

**APPLICATION INSTRUCTIONS**

Please complete the application in full. One application per animal. Incomplete applications will not be processed and will be returned. License fees must accompany this application. If you are applying by mail, payment must be made by check or money order, payable to the "Town of Morristown". Cash payments are only accepted in person. Visit www.townofmorristown.org/petlicensing to apply online. If applying by mail, a self-addressed envelope must accompany this application along with your check or money order. Please mail your application to the Division of Health address at the top of this form. Credit Card payments are now accepted. License fees are as follows:

<table>
<thead>
<tr>
<th></th>
<th>One Year</th>
<th>Three Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dog License, Spayed or Neutered:</td>
<td>$10.00</td>
<td>$25.00</td>
</tr>
<tr>
<td>Dog License, NOT Spayed or Neutered:</td>
<td>$20.00</td>
<td>$35.00</td>
</tr>
</tbody>
</table>

**Late Fees are $5 per month, per pet starting July 1st.
**A $2.00 convenience fee will be charged for all credit card transactions.

**Date of Application:**  
Application is for (check one):  
- ☐ New License  
- ☐ License Renewal

**OWNER INFORMATION**

- Last Name:  
- First Name:  
- Home Address:  
- Home Phone:  
- Work Phone:  
- Cell Phone:  
- Email:  

**DOG INFORMATION**

- Dog's Name:  
- Dog's Date of Birth:  
- Age:  
- Breed:  
- Color/Markings:  
- Hair Length (check one):  
  - ☐ Short Haired  
  - ☐ Long Haired  
- Sex:  
  - ☐ Male  
  - ☐ Female  
- Rabies Expiration Date:  
- Microchip Number (If Applicable):  
- Debarked?  
  - ☐ Yes  
  - ☐ No  

**I certify that the information provided herein is true to the best of my knowledge.**

**FOR OFFICIAL USE ONLY**

- Date License Issued:  
- Check/MO #:  
- Tag #:  
- License #:  
- Issued by:  