

BOROUGH OF MONTVALE BOARD OF HEALTH DOG & CAT LICENSE APPLICATION

Return to:
Animal Licensing Agent
Borough of Montvale
12 DePiero Drive
Montvale, NJ 07645

For Official Use Only:
Check# _____
Cash _____
Total Paid _____

Checks made payable to Borough of Montvale

Fees per Pet: Neutered \$18.00/Non-Neutered \$21.00 Pet Owners 55+ years Neutered & Non-Neutered \$10.00

Owner _____ Phone # _____

Address _____ *Montvale, NJ 07645*

Email Address _____

*** RABIES VACCINATIONS MUST BE VALID THROUGH NOVEMBER OF LICENSING YEAR. ***

PET #1 License# _____

Dog ___ Cat ___ Breed: _____ Name: _____ Sex: ___Male ___Female Spayed/Neutered: ___Yes ___No

Hair Length: _____Short _____Medium _____Long Size: ___Small ___Medium ___Large Color & Markings: _____

Rabies Expiration Date: _____ **Rabies Vaccination Document Is Required**

PET #2 License # _____

Dog ___ Cat ___ Breed: _____ Name: _____ Sex: ___Male ___Female Spayed/Neutered: ___Yes ___No

Hair Length: _____Short _____Medium _____Long Size: ___Small ___Medium ___Large Color & Markings: _____

Rabies Expiration Date: _____ **Rabies Vaccination Document Is Required**

PET #3 License# _____

Dog ___ Cat ___ Breed: _____ Name: _____ Sex: ___Male ___Female Spayed/Neutered: ___Yes ___No

Hair Length: _____Short _____Medium _____Long Size: ___Small ___Medium ___Large Color & Markings: _____

Rabies Expiration Date: _____ **Rabies Vaccination Document Is Required**

PET #4 License# _____

FOUR PET MAX. PER HOUSEHOLD.

Dog ___ Cat ___ Breed: _____ Name: _____ Sex: ___Male ___Female Spayed/Neutered: ___Yes ___No

Hair Length: _____Short _____Medium _____Long Size: ___Small ___Medium ___Large Color & Markings: _____

Rabies Expiration Date: _____ **Rabies Vaccination Document Is Required**

PETS MUST BE REGISTERED ANNUALLY BY LAST DAY OF FEBRUARY TO AVOID A LATE FEE. LATE FEE IS \$10.00 PER PET & FOR SENIORS \$5.00 PER PET. QUESTIONS CALL 201-391-5700 EXT. 257 OR EMAIL kciborowski@montvaleboro.org.