

Mount Olive Township

Cat License Application

RETURN TO:
Mt. Olive Health Dept.
P.O. Bo 450
Budd Lake, N.J. 07828

FEES:
Altered: \$8.00
Unaltered: \$11.00
Late Fee: \$3.00 per month after 4/30

Make checks payable to "Mt. Olive Township"

PLEASE PRINT THE FOLLOWING INFORMATION:

OWNER _____ PHONE _____

ADDRESS _____

MAILING ADDRESS (If different) _____

CAT'S SEX: (M) (F) NEUTERED: (Y) (N) SPAYED (Y) (N) COLOR: _____

BREED: _____ AGE: _____ LENGTH OF HAIR (L) (S)

CAT'S NAME: _____ **DATE OF RABIES INNOC: _____

**The state of N.J. requires written proof of current rabies vaccination. The vaccination must be good for the duration of the license issued. Written proof of spaying or neutering will be needed for price reduction. Please mail copies with this form when applying. For additional information, contact Animal Control Officer W. Cirone at 691-0900, Ext. 7334.

Owners Signature _____