

## **CITY OF LINWOOD APPLICATION FOR PET LICENSE**

D-4	1.a.f.a	nation:
PPT	Intorn	nation:

	Circle One:	Dog	Cat				
	Pet Name:						
	Rabies Vaccination Expiration Date:						
	Veterinarian:						
	Sex:(Circle O	ne) Male	Female				
	Age:						
	Spayed/Neutered:(Circle One) Yes No						
	Breed:						
	Hair Length:(0	Circle One)	Short	Medium	Long		
	Color:						
Owner Information:							
	Name:						
	Address:						
	Phone:						
	Other:						
_							
Fees:	Dog -	Spayed or Ne Not Spayed o		\$8.00 \$11.0			
	Cat -	Spayed or Ne Not Spayed o		\$6.00 \$9.00			

## Notes:

- Make checks payable to "The City of Linwood"
  You must provide proof of rabies vaccination valid through November 1<sup>st</sup> of the current year along with proof of spaying/neutering.
  Mail application and payment to the City Clerk's Office, Linwood City Hall, 400 Poplar
- Avenue, Linwood, NJ 08221