



CITY OF PLAINFIELD DOG & CAT LICENSE APPLICATION

Owner's Information

Name _____ Date _____

Address _____ Telephone _____

Pet's Information

Dog or Cat _____ Pet's Name _____
(Please circle one)

Sex _____ Breed _____ Age _____ Hair Length _____

Color & Markings _____

Address at which dog will be kept, if different from above _____

Spayed/Neutered: Yes ___ No ___ Date _____

Rabies Vaccination Compulsory

Vaccination Expires _____

Please bring a valid rabies certificate

License Fee

Spayed	Non-Spayed
Neutered	Non-Neutered
\$15.20	\$18.20

Please make your check or money order payable to:

City of Plainfield

Application and payment can be mailed to:

Division of Health, 510 Watchung Ave., 2nd Fl.

Plainfield, NJ 07060



THIS LICENSE IS VALID FOR ONE (1) YEAR COVERING THE ONE (1) YEAR PERIOD IN WHICH YOUR PET'S RABIES VACCINE IS VALID OR VALID FOR THREE (3) YEARS COVERING THE THREE (3) YEAR PERIOD IN WHICH YOUR PET'S RABIES VACCINE IS VALID. ALL LICENSES EXPIRE JANUARY 31ST OF THE RENEWAL YEAR.

STATE LAW requires that in order to issue a license the rabies vaccination must not expire prior to November 1st of the licensing year.