

**HARDWICK TOWNSHIP
2010 DOG LICENSE REGISTRATION**

By law all dogs over the age of 7 months must be vaccinated and licensed. Licenses for 2010 are available at the Hardwick Municipal Building during the months of January and February on Mondays and Fridays from 9:30 AM to 1:30 PM and Wednesdays from 9:30 AM to 8:00 PM or by mailing the form below to Beth Dwyer, Licensing Clerk, 40 Spring Valley Rd., Hardwick, NJ 07825 (908-362-6528 EX 7).

REGISTRATION INSTRUCTIONS

- Please send a self-addressed, stamped envelope to the address noted above.
- If your dog was licensed in Hardwick Township in calendar year 2009 and the **rabies vaccination expiration date is good through October 31, 2010**, please provide license fee with your name, address, phone number and dog's name noted on the check. There is no need to fill out the form below because all 2009 licensing information is on line.
- If your dog was licensed in Hardwick Township in calendar year 2009 and the **rabies vaccination expiration date is prior to October 31, 2010**, please provide new proof of vaccination and the licensing fee with your name, address, phone number and dog's name noted on the check. There is no need to fill out the form below because all 2009 licensing information is on line.

*Please note; If your dog was vaccinated on November 14, 2009 during the **Hardwick Township Rabies Clinic** this information is already available and will not be needed. Please provide licensing fee with your name, address, phone number and dog's name noted on the check.*

- If your dog was not licensed in Hardwick Township in calendar year 2009 please provide a copy of a current rabies inoculation and a copy of spaying/neutering documentation. The rabies shot cannot expire before November 2010 as per NJ State Law.

- License fees per dog are: ___ \$ 7.00 Spayed/Neutered ___ \$10.00 Non Spayed/Neutered

CHECK ONLY payable to Hardwick Township - NO CASH

Late fees after March 1 st	\$ 5.00 per dog/per month
Late fees after April 1 st	\$10.00 per dog/per month

2010 DOG LICENSE REGISTRATION APPLICATION

Owner's Name _____

Mailing Address _____

Physical Location _____

Telephone No. _____ Listed or Not Listed?

Dog's Name _____ Breed _____

Hair Color/Markings _____

Dog's Birth Date _____ Sex M F (please circle)

Hair Length S M L (please circle) Spayed _____ Neutered _____